

# **Health and Human Services Appropriations Bill House File 811**

Last Action:

**Senate Appropriations  
Committee**

April 13, 2009

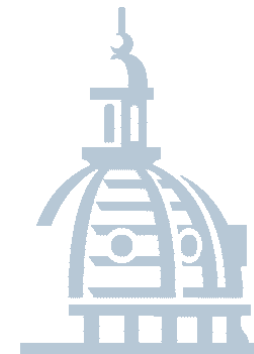
**An Act relating to and making appropriations for health and human services and including other related provisions and appropriations, providing penalties, making penalties applicable and providing effective, retroactive, and applicability date provisions.**

## **NOTES ON BILLS AND AMENDMENTS (NOBA)**

Available on line at <http://www3.legis.state.ia.us/noba/index.jsp>

### **Fiscal Services Division**

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## EXECUTIVE SUMMARY NOBA

## HOUSE FILE 811 HEALTH AND HUMAN SERVICES APPROPRIATIONS BILL

### FUNDING SUMMARY

- Appropriates a total of \$1.249 billion from the General Fund and 6,990.7 FTE positions to the Departments of Elder Affairs, Public Health, Human Services, and Veterans Affairs, and the Iowa Veterans Home. This is an increase of \$25.1 million and a decrease of 136.8 FTE positions compared to the estimated net FY 2009 appropriations. This Bill provides for a reduction in the FY 2009 Medicaid appropriation of \$52.0 million.
- Appropriates a total of \$414.8 million from other funds. This is a decrease of \$136.3 million compared to the estimated net FY 2009 appropriations. This includes:
  - A decrease of \$7.3 million from the Gambling Treatment Fund to the Department of Public Health. This reflects the elimination of the Fund and the transfer of those monies to the General Fund. The appropriations are similar in amount for the two purposes within the Addictive Disorders budget unit within the DPH. (Page 3, Line 27; Page 5, Line 14; Page 84, Line 6; and Page 92, Line 22 through Page 96, Line 23)
  - \$142.7 million from the Temporary Assistance to Needy Families (TANF) Fund to the Department of Human Services. There is no change compared to the estimated net FY 2009 appropriation. (Page 12, Line 15 through Page 15, Line 34)
  - \$27.3 million from the Senior Living Trust Fund (SLTF) to the Departments of Elder Affairs, Human Services, and Inspections and Appeals, and the Iowa Finance Authority. This is a decrease of \$95.0 million compared to the estimated net FY 2009 appropriation. (Page 62, Line 16 through Page 65, Line 9)
  - A decrease of \$624,000 from the Property Tax Relief Fund to the Medicaid Program. This was a one-time FY 2009 appropriation. (Not part of this FY 2010 Bill)
  - \$1.3 million from the Pharmaceutical Settlement Account to Medical Contracts. This is no change compared to the estimated net FY 2009 appropriation. (Page 65, Line 10)
  - \$120.3 million from the IowaCare Account to the Department of Human Services (DHS), the University of Iowa Hospitals and Clinics, and Polk County Broadlawns Medical Center. This is an increase of \$8.1 million compared to the estimated net FY 2009 appropriation. (Page 65, Line 19 through Page 68, Line 23)
  - \$5.4 million from the Health Care Transformation Account (HCTA) to the DHS and Department of Elder Affairs (DEA). This is a decrease of \$200,000 compared to the estimated net FY 2009 appropriation. (Page 68, Line 24 through Page 70 Line 16)
  - \$117.8 million from the Health Care Trust Fund to various Departments. This is a decrease of \$11.9 million compared to the estimated net FY 2009 appropriation. (Page 76, Line 14 through Page 81, Line 30)

## EXECUTIVE SUMMARY NOBA

## HOUSE FILE 811 HEALTH AND HUMAN SERVICES APPROPRIATIONS BILL

### MAJOR INCREASES, DECREASES, AND TRANSFERS OF EXISTING PROGRAMS

Makes the following General Fund or other fund changes for FY 2010:

- **Department of Elder Affairs:** A decrease of \$316,000 and 3.0 FTE positions compared to the estimated net FY 2009 General Fund appropriation. (Page 1, Line 4)
- **Department of Public Health:** A net increase of \$25.3 million and a net decrease of 7.45 FTE positions compared to the estimated net FY 2009 General Fund appropriation. The significant changes include:
  - An increase of \$25.6 million for Addictive Disorders. (Page 3, Line 27)
  - A decrease of \$336,000 for Healthy Children and Families. (Page 6, Line 20)
  - An increase of \$594,000 for Chronic Conditions. (Page 7, Line 14)
  - An increase of \$2.4 million for Community Capacity. (Page 8, Line 6)
  - A decrease of \$750,000 for Elderly Wellness. (Page 9, Line 3)
  - An increase of \$279,000 for Environmental Hazards. (Page 9, Line 12)
  - A decrease of \$1.2 million for Infectious Diseases. (Page 9, Line 23)
  - An increase of \$455,000 for Public Protection. (Page 9, Line 29)
  - A decrease of \$132,000 for Resource Management. (Page 10, Line 20)
- **Department of Human Services:** A net increase of \$2.9 million and a net decrease of 147.15 FTE positions compared to the estimated net FY 2009 General Fund appropriation. The changes include:
  - A decrease of \$7.7 million for the Family Investment Program. (Page 18, Line 8)
  - A decrease of \$1.7 million for the Child Support Recovery Unit. (Page 20, Line 4)
  - A net increase of \$32.7 million for the Medical Assistance Program. (Page 21, Line 12)
  - A decrease of \$302,000 for Medical Contracts. (Page 27, Line 35)
  - An increase of \$969,000 for the State Children's Health Insurance Program. (Page 29, Line 7)
  - A decrease of \$521,000 for Medical Assistance and Children's Health Insurance Expansions. (Page 88, Line 11)
  - A decrease of \$2.7 million for the Child Care Assistance Program. (Page 29, Line 23)
  - A decrease of \$837,000 for the Toledo Juvenile Home. (Page 32, Line 22)
  - A decrease of \$1.3 million for the Eldora Training School. (Page 32, Line 27)
  - An increase of \$1.6 million for Child and Family Services. (Page 33, Line 2)
  - An increase of \$1.2 million for the Adoption Subsidy Program. (Page 39, Line 23)
  - A decrease of \$210,000 for the Family Support Subsidy Program. (Page 41, Line 7)
  - A decrease of \$3.2 million for the four Mental Health Institutes. (Page 41, Line 31 through Page 42, Line 25)

## EXECUTIVE SUMMARY NOBA

## HOUSE FILE 811 HEALTH AND HUMAN SERVICES APPROPRIATIONS BILL

### MAJOR INCREASES, DECREASES, AND TRANSFERS OF EXISTING PROGRAMS (CONTINUED)

- A decrease of \$2.9 million for the two State Resource Centers. (Page 43, Line 16 through Line 21)
- A decrease of \$1.6 million for the State Cases Program. (Page 44, Line 28)
- An increase of \$158,000 for the Sexual Predator Commitment Program. (Page 47, Line 17)
- A decrease of \$7.8 million and 183.7 FTEs for Field Operations and General Administration. (Page 48, Line 5 and Line 27)
- A decrease of \$729,000 for Family Planning Funding. (Page 49, Line 23)
- A decrease of \$97,000 for Pregnancy Counseling and Support Services. (Page 50, Line 3)
- ***Veterans Affairs:*** A net decrease of \$2.8 million and a net increase of 20.8 FTE positions from the General Fund for the Department of Veterans Affairs compared to the estimated net FY 2009 appropriation. This includes:
  - An increase of \$132,000 for the Department of Veterans Affairs. (Page 11, Line 3)
  - A decrease of \$3.1 million and an increase of 20.8 FTE positions for the Iowa Veterans Home. (Page 11, Line 10)
  - An increase of \$414,000 for the County Veterans Grant Program. (Page 12, Line 4)
- ***Department of Veterans Affairs:*** Requires the Iowa Veterans Home to adjust the incentive therapy program payment schedule. (Page 11, Line 22)
- ***Department of Human Services (DHS):***
  - Requires the Iowa Autism Council to work with the DHS to review the option of implementing a Medicaid waiver for autism services. (Page 26, Line 30)
  - Requires the DHS to issue a Request for Proposal (RFP) for a Medicaid correct coding initiative. (Page 27, Line 2)
  - Requires the DHS to request a Medicaid State Plan Amendment for applied behavioral analysis therapy to be effective for FY 2011. (Page 27, Line 11)
  - Permits the DHS to issue an RFP for a Medicaid transportation brokerage system. (Page 27, Line 18)
  - Specifies legislative intent regarding avoidance of a waiting list in FY 2010 with expectation of sufficient funding for child care subsidy assistance in FY 2011. (Page 29, Line 30)
  - Requires the DHS to work with all groups that visit or inspect child care providers to streamline the process. (Page 32, Line 1)
  - Requires the DHS to work with juvenile courts and juvenile court services to improve communication and eliminate barriers. (Page 39, Line 14)
  - Requires the DHS to review potential outcomes of suspending adoption subsidy payments while a child is placed by the court in a placement other than an adoptive family. (Page 40, Line 13)
  - Requires the Department to staff a task force appointed by the Governor to review the four State Mental Health Institutes. (Page 42, Line 34)

### STUDIES AND INTENT LANGUAGE

## EXECUTIVE SUMMARY NOBA

## HOUSE FILE 811 HEALTH AND HUMAN SERVICES APPROPRIATIONS BILL

### STUDIES AND INTENT LANGUAGE (CONTINUED)

- Requires State Resource Center superintendents to submit quarterly reports regarding FTE positions. (Page 44, Line 21)
- Requires the DHS to submit a proposal to close one of the Mental Health Institutes. (Page 42, Line 26)
- Requires the DHS to submit proposed rules that have a financial impact that were not included in the FY 2010 budget to the Chairpersons and Ranking Members of the Health and Human Services Appropriations Subcommittee and the Appropriations Committees prior to the submittal for the administrative rules process. (Page 60, Line 7)
- Requires the Mental Health, Mental Retardation, Developmental Disabilities, and Brain Injury Commission and the Iowa Mental Health Planning Council to meet quarterly. (Page 76, Line 1)
- ***All Four Departments:***
  - Requires the Departments of Elder Affairs, Public Health, Human Services, Veterans Affairs, and Iowa Veterans Home to:
    - Develop a plan for maximizing efficiencies within the budgets for FY 2011. (Page 60, Line 22)
    - Retain to the extent possible positions providing direct services to the public in reductions in full-time equivalent positions. (Page 60, Line 32)
- ***Other:***
  - Requires the Chairpersons of the Health and Human Services Appropriations Subcommittee to appoint a stakeholder task force to address the adult mental health and developmental disabilities system. (Page 75, Line 23)
- Specifies legislative intent for the DHS to initiate an evaluation system for nursing facility performance. (Page 57, Line 2)
- Reduces the FY 2010 appropriation in HF 2700 (FY 2009 Standings Appropriations Act) for mental health allowed growth and provides for the FY 2010 distribution of the funds. (Page 71, Line 10 through Page 75, Line 22)
- Reduces the amount of funding transferred from the General Fund to the Health Care Trust Fund. (Page 81, Line 16)
- Increases the FY 2009 appropriation from the IowaCare Account to the Polk County Broadlawns Medical Center. Increases the amount of tax levy proceeds from the Medical Center to the Treasurer of State. (Page 81, Line 33 through Page 83, Line 13)
- Requires the DHS to revise the projects for the emergency mental health crisis system and a mental health services system for children and youth and to continue both projects for 24 months. (Page 85, Line 18)
- Reduces the FY 2009 nursing facility budget cap in the Medicaid Program. (Page 86, Line 8)

### SIGNIFICANT CHANGES TO THE CODE OF IOWA

## EXECUTIVE SUMMARY NOBA

## HOUSE FILE 811 HEALTH AND HUMAN SERVICES APPROPRIATIONS BILL

### SIGNIFICANT CHANGES TO THE CODE OF IOWA (CONTINUED)

### FY 2009 CARRYFORWARD, REDUCTIONS, OR SUPPLEMENTALS

- Includes veterans in the existing Department of Public Health Viral Hepatitis Program. (Page 89, Line 11)
- Requires the Commission on Elder Affairs (Commission on Aging starting July 1, 2009) to perform the duties of the Senior Living Coordinating Unit and repeals the Senior Living Coordinating Unit. (Page 90, Line 13 through Page 92, Line 21)
- Increases the amount of gambling revenue by \$6.0 million to \$66.0 million to be deposited in to the General Fund. (Page 92, Line 24)
- Eliminates the Gambling Treatment Fund and various statutory references. (Page 93, Line 15 through Page 96, Line 23)
- Transfers the Child Death Review Team to the Office of the State Medical Examiner. (Page 96, Line 26 through Page 99, Line 3)
- Implements the Public Health Modernization initiative. Creates the Governmental Public Health Advisory Council and Committee, and the Governmental Public Health System Fund. (Page 99, Line 5 through Page 111, Line 14)
- Eliminates the retailer revenue for the Electronic Benefit Transfer from the Food Assistance Program. (Page 111, Line 20)
- Requires the Department of Human Services to apply certain background checks to certain children centers. (Page 112, Line 6)
- ***Department of Elder Affairs:***
  - Permits the carryforward of \$216,000 from the FY 2009 Senior Living Trust Fund appropriation to FY 2010 and FY 2011 for matching available federal nutrition funding from the American Reinvestment and Recovery Act of 2009. (Page 86, Line 15)
- ***Department of Public Health:***
  - A combination of \$1.0 million from the General Fund, Health Care Trust Fund, and the Healthy Iowans Tobacco Trust FY 2009 appropriations is carried forward to FY 2010 for addictive disorders. (Page 83, Line 22; Page 83, Line 32; Page 87, Line 16)
  - The remainder of the Gambling Treatment Trust Fund is carried forward to FY 2010 for gambling treatment. (Page 84, Line 6)
- ***Department of Veterans Affairs:***
  - Eliminates the FY 2009 FTE cap for the Iowa Veterans Home. (Page 84, Line 13)
  - Funds remaining from the Vietnam Veteran Bonus and the Injured Veterans Grant Program appropriations are carried forward into FY 2010. (Page 87, Line 26 and Page 87, Line 35)
- ***Department of Human Services:***
  - Increases the FY 2009 IowaCare Account appropriation for Polk County Broadlawns Medical Center. (Page 81, Line 33)

## EXECUTIVE SUMMARY NOBA

## HOUSE FILE 811 HEALTH AND HUMAN SERVICES APPROPRIATIONS BILL

### FY 2009 CARRYFORWARD, REDUCTIONS, OR SUPPLEMENTALS (CONTINUED)

### EFFECTIVE DATES

- Decreases the FY 2009 General Fund appropriation for Medicaid. (Page 85, Line 6)
- The remainder of the FY 2009 State Supplementary Assistance appropriation is carried forward to FY 2010 for the same purpose. (Page 85, Line 34)
- Strikes the FY 2009 transfer of \$3.0 million from the HCTA to the IowaCare Account. (Page 86, Line 25)
- Requires the remaining FY 2009 General Fund appropriation for Medicaid to carry forward to FY 2010 in lieu of being transferred to the Senior Living Trust Fund. (Page 86, Line 34)
- Decreases the previously enacted FY 2010 appropriation for the Medicaid, Healthy and Well Kids in Iowa (hawk-i), and hawk-i Expansion Programs. (Page 88, Line 9)
- The following changes take effect on enactment.
- Requirement that the DHS and juvenile court services develop an FY 2009 funding distribution plan by June 15, 2008. (Page 62, Line 3)
- Carryforward of funds in the Department of Public Health relating to:
  - Addictive Disorders. (Page 83, Line 22; Page 83, Line 32; Page 87, Line 16; and Page 88, Line 28)
  - Gambling Treatment. (Page 84, Line 6)
- Elimination of the FY 2009 FTE cap for the Iowa Veterans Home. (Page 84, Line 13)
- Decrease in the FY 2009 General Fund appropriation for Medicaid. (Page 85, Line 6)
- Extension of the emergency and children's mental health projects. (Page 85, Line 18)
- Carryforward of the FY 2009 State Supplementary Assistance Program appropriation to FY 2010. (Page 85, Line 34)
- Change in the FY 2009 Medicaid nursing facility budget cap. (Page 86, Line 8)
- Carryforward of FY 2009 Senior Living Trust Fund appropriation of \$216,000. (Page 86, Line 15)
- Elimination of the FY 2009 Health Care Transformation Account appropriation to the IowaCare Account. (Page 86, Line 25)
- Carryforward of FY 2009 Medicaid appropriation for FY 2010 Medicaid expenditures. (Page 86, Line 34)
- Carryforward of FY 2008 Vietnam Veterans Bonus funding to FY 2009 for the same purpose. (Page 87, Line 26)
- Carryforward of FY 2007 Injured Veterans Grant Program funding to FY 2009 for the same purpose. (Page 87, Line 35)
- Decrease in the FY 2010 Medicaid, hawk-i, and hawk-i Expansion Program appropriation. (Page 88, Line 9)
- Transfer of the funds remaining in the Child Care Credit Fund to the General Fund. (Page 88, Line 24)

**EXECUTIVE SUMMARY  
NOBA**

**HOUSE FILE 811  
HEALTH AND HUMAN SERVICES APPROPRIATIONS BILL**

**EFFECTIVE DATE AND  
RETROACTIVITY PROVISION**

- The increases in the FY 2009 IowaCare Account appropriation to Polk County Broadlawns Medical Center and the hospital tax levy transferred from Polk County to the Treasurer of State are effective on enactment and retroactive to July 1, 2008. (Page 81, Line 33 through Page 83, Line 17)
- Medicaid federal compliance with continuous eligibility for children provision. (Page 112, Line 24 through Page 113, Line 15)



House File 811

House File 811 provides for the following changes to the Code of Iowa.

Page #	Line #	Bill Section	Action	Code Section	Description
3	12	1.6	Nwthstnd	Sec. 231.33(19) and 231.63	AAA Board Training and End of Life Planning
13	2	5.2	Nwthstnd	Sec. 8.33	Nonreversion of Contract Services Funds
13	16	5.3	Nwthstnd	Sec. 8.33	FY 2008 FaDSS Carryforward
19	12	7.4	Nwthstnd	Sec. 8.39	DHS Authority to Transfer TANF Funds
20	34	8.4	Nwthstnd	Sec. 598.22A	Retires Child Support Debt
45	24	24.4	Nwthstnd	Sec. 8.33	State Cases Program Carryforward
48	34	27.3	Nwthstnd	Sec. All, Chapter 217	Reorganization of Service Delivery
53	5	32.1(j)	Nwthstnd	Sec. All	Anesthesiologist Reimbursement Rate Increase
53	9	32.1(k)	Nwthstnd	Sec. 249A.20	Provider Rates
54	19	33.4	Nwthstnd	Sec. 234.38	Family Foster Care Rates
56	3	32.9(b)	Nwthstnd	Sec. 232.141(8)	Juvenile Shelter Care Reimbursement Rate
56	10	33	Nwthstnd	Sec. All	Inflation Rate for ICF/MR Reimbursement Rates
57	2	33	Amends	Sec. 33.4, Chapter 1187, 2008 Iowa Acts	Nursing Facility Reimbursement
61	3	37	Nwthstnd	Sec. All	Meal Reimbursement State Employees
61	13	38	Nwthstnd	Sec. All	Out-of-State Travel
63	27	42.2	Nwthstnd	Sec. 249H.7	Senior Living Programs
66	22	47.1(b)	Nwthstnd	Sec. All	IowaCare Appropriation Payments
70	29	51	Nwthstnd	Sec. 8.33	Carryforward of Medicaid Funds
71	10	52	Amends	Sec. 1.1, Chapter 1191, 2008 Iowa Acts	Mental Health Allowed Growth
71	31	53.1	Amends	Sec. 1, Chapter 1191, 2008 Iowa Acts	Purchase of Services Contracts
72	8	53.2	Adds	Sec. 1.2, Chapter 1191, 2008 Iowa Acts	Mental Health Allowed Growth
73	5	53.3	Adds	Sec. 1.3, Chapter 1191, 2008 Iowa Acts	Mental Health Allowed Growth

Page #	Line #	Bill Section	Action	Code Section	Description
73	12	53.4-6	Adds	Sec. 1.4, Chapter 1191, 2008 Iowa Acts	Mental Health Allowed Growth
81	16	58	Amends	Sec. 453A.35(1)	Transfer of Tobacco Revenue to the Health Care Trust Fund
81	33	59	Amends	Sec. 44.3, Chapter 1187, 2008 Iowa Acts	IowaCare Broadlawns
82	19	60.1	Nwthstnd	Sec. 249J.24(6)(a)(1)	IowaCare Broadlawns Tax Revenue Collection
82	31	60.2	Nwthstnd	Sec. 249J.24(6)(a)(2)	IowaCare Broadlawns Tax Revenue Collection
83	22	62	Nwthstnd	Sec. 8.33	Carryforward of FY 2009 Healthy Iowans Tobacco Trust Funds
83	32	63	Nwthstnd	Sec. 8.33	Carryforward of FY 2009 Addictive Disorders General Fund Appropriation
84	6	64	Nwthstnd	Sec. 3, Chapter 1187, 2008 Iowa Acts	Gambling Treatment Fund
84	13	65	Amends	Sec. 60, Section 4(2), Chapter 1187, 2008 Iowa Acts	Veterans Home FTE Positions
84	32	66	Nwthstnd	Sec. 5, Chapter 1187, 2008 Iowa Acts	FIP Carryforward
85	6	67	Amends	Sec. 9(2), Chapter 1187, 2008 Iowa Acts	Medicaid Deappropriation
85	18	68	Amends	Sec. 9(20), Chapter 1187, 2008 Iowa Acts	Emergency and Children's Mental Health Services
85	34	69	Amends	Sec. 12; Chapter 1187, 2008 Iowa Acts	State Supplementary Assistance Carryforward
86	8	70	Amends	Sec. 32.1(a)(1), Chapter 1187, 2008 Iowa Acts	Nursing Facility Cap
86	15	71	Amends	Sec. 39, Chapter 1187, 2008 Iowa Acts	Elder Affairs Senior Living Trust Carryforward
86	25	72	Amends	Sec. 46, Chapter 1187, 2008 Iowa Acts	IowaCare Transfer
86	34	73	Amends	Sec. 50, Chapter 1187, 2008 Iowa Acts	Medicaid Carryforward
87	16	74	Nwthstnd	Sec. 62(1), Chapter 1187, 2008 Iowa Acts	Health Care Trust Fund - Addictive Disorders Carryforward

Page #	Line #	Bill Section	Action	Code Section	Description
87	26	75	Nwthstnd	Sec. 68, Chapter 1187, 2008 Iowa Acts	Carryforward of FY 2008 Vietnam Veterans Bonus Fund
87	35	76	Amends	Sec. 69, Chapter 1187, 2008 Iowa Acts	Carryforward of FY 2007 Injured Veterans Grant Program Appropriation
88	9	77	Amends	Sec. 16, Chapter 1188, 2008 Iowa Acts	Covering All Children Appropriation
89	11	81	Amends	Sec. 135.19	Veterans Hepatitis Program
90	10	82	Repeals	Sec. 135.20	Veterans Hepatitis C Awareness Program
90	13	83	Amends	Sec. 231.14	Senior Living Coordinating Unit
90	25	84	Amends	Sec. 249H.3(6)(b)	Senior Living Coordinating Unit
90	32	85	Amends	Sec. 249H.3(8)(b)	Senior Living Coordinating Unit
91	4	86	Amends	Sec. 249H.3(12)	Senior Living Coordinating Unit
91	6	87	Amends	249H.4(6)	Senior Living Coordinating Unit
91	8	88	Amends	Sec. 249H.7(1)	Senior Living Coordinating Unit
91	23	89	Amends	Sec. 249H.7(2)(1)	Senior Living Coordinating Unit
91	29	90	Amends	Sec. 249H.7(2)(c)	Senior Living Coordinating Unit
92	1	91	Amends	Sec. 249H.9(1)	Senior Living Coordinating Unit
92	10	92	Amends	Sec. 249H.9(1)	Senior Living Coordinating Unit
92	24	93	Amends	Sec. 8.57(6)(e)(1)	Gambling Funds Transfer to State General Fund
93	15	94	Amends	Sec. 99D.7(22)	Gambling Treatment Fund
93	33	95	Repeals	Sec. 99D.15(5)	Gambling Treatment Fund
93	35	96	Amends	Sec. 99F.4(22)	Gambling Treatment Fund
94	18	97	Repeals	Sec. 99F.11(3)(c)	Gambling Treatment Fund
94	20	98	Amends	Sec. 99G.39(1)	Gambling Treatment Fund
95	3	99	Amends	Sec. 135.150	Gambling Treatment Fund
96	26	101	Amends	Sec. 135.43(1)	Child Death Review Team Duties for State Medical Examiner
96	33	102	Amends	Sec. 135.43(2)	Child Death Review Team Duties for State Medical Examiner
97	15	103	Amends	Sec. 135.43(4)	Child Death Review Team Duties for State Medical Examiner
97	24	104	Amends	Sec. 135.43(7 and 8)	Child Death Review Team Duties for State Medical Examiner

Page #	Line #	Bill Section	Action	Code Section	Description
98	26	105	Adds	Sec. 691.6(10)	Child Death Review Team Duties for State Medical Examiner
100	1	108	Adds	Sec. 135A.1	Public Health Modernization
100	4	109	Adds	Sec. 135A.2	Public Health Modernization
101	32	110	Adds	Sec. 135A.3	Public Health Modernization
102	10	111	Adds	Sec. 135A.4	Public Health Modernization
105	1	112	Adds	Sec. 135A.5	Public Health Modernization
106	30	113	Adds	Sec. 135A.6	Public Health Modernization
108	7	114	Adds	Sec. 135A.7	Public Health Modernization
109	12	115	Adds	Sec. 135A.8	Public Health Modernization
110	16	116	Adds	Sec. 135A.9	Public Health Modernization
110	35	117	Adds	Sec. 135A.10	Public Health Modernization
111	12	118	Adds	Sec. 135A.11	Public Health Modernization
111	20	120	Amends	Sec. 234.12A(1)	Eliminates EBT Fee
112	6	121	Amends	Sec. 237B.1(3)	Children Center Background Check Requirement
112	24	122	Amends	Sec. 249A.3(14)	Medicaid Continuous Eligibility
113	27	125	Repeals	Sec. 237A.28 and 422.100	Child Care Tax Credit Repeal

1 1 DIVISION I  
1 2 GENERAL FUND AND BLOCK GRANT APPROPRIATIONS

1 3 ELDER AFFAIRS

1 4 Section 1. DEPARTMENT OF ELDER AFFAIRS. There is  
1 5 appropriated from the general fund of the state to the  
1 6 department of elder affairs for the fiscal year beginning July  
1 7 1, 2009, and ending June 30, 2010, the following amount, or so  
1 8 much thereof as is necessary, to be used for the purposes  
1 9 designated:

General Fund appropriation to the Department of Elder Affairs.

1 10 For aging programs for the department of elder affairs and  
1 11 area agencies on aging to provide citizens of Iowa who are 60  
1 12 years of age and older with case management for the frail  
1 13 elderly only if the monthly cost per client for case  
1 14 management for the frail elderly services provided does not  
1 15 exceed the amount specified in this section, resident advocate  
1 16 committee coordination, employment, and other services which  
1 17 may include but are not limited to adult day services, respite  
1 18 care, chore services, telephone reassurance, information and  
1 19 assistance, and home repair services, and for the construction  
1 20 of entrance ramps which make residences accessible to the  
1 21 physically handicapped, and for salaries, support,  
1 22 administration, maintenance, and miscellaneous purposes, and  
1 23 for not more than the following full-time equivalent  
1 24 positions:  
1 25 ..... \$ 4,958,230  
1 26 ..... FTEs 37.50

General Fund appropriation to the Department of Elder Affairs for FY 2010.

DETAIL: This is a net decrease of \$316,214 and 3.00 FTE positions compared to the estimated net FY 2009 appropriation. This includes:

- A decrease of \$250,000 and 2.00 FTE positions to eliminate the Office of Substitute Decision Maker.
- A decrease of \$200,000 and 1.00 FTE position to eliminate the Aging and Disability Resource Center.
- A decrease of \$75,000 to eliminate the Long-Term Care Public Awareness Campaign.
- A decrease of \$19,000 to eliminate Area Agency on Aging (AAA) Board Training.
- A decrease of \$82,112 to eliminate AAA administration funding.
- A decrease of \$20,237 to the Retired Senior Volunteer Program.
- An increase of \$220,000 to be used to meet unmet home and community based service needs for Seniors.
- An increase of \$110,135 to replace savings identified in FY 2009.

1 27 1. Funds appropriated in this section may be used to  
1 28 supplement federal funds under federal regulations. To

Permits the use of funds appropriated in this Subsection to supplement federal funds for elderly services if those services are approved by an Area Agency on Aging. Requires local Area Agencies

1 29 receive funds appropriated in this section, a local area  
1 30 agency on aging shall match the funds with moneys from other  
1 31 sources according to rules adopted by the department. Funds  
1 32 appropriated in this section may be used for elderly services  
1 33 not specifically enumerated in this section only if approved  
1 34 by an area agency on aging for provision of the service within  
1 35 the area.

on Aging to match the funds for aging programs and services.

2 1 2. a. Of the funds appropriated in this section,  
2 2 \$1,385,015 shall be transferred to the department of human  
2 3 services in equal amounts on a quarterly basis for  
2 4 reimbursement of case management services provided under the  
2 5 medical assistance elderly waiver. The department of human  
2 6 services shall adopt rules for case management services  
2 7 provided under the medical assistance elderly waiver in  
2 8 consultation with the department of elder affairs.

Requires \$1,385,015 to be transferred to the Department of Human Services (DHS) in equal amounts on a quarterly basis for Case Management reimbursement under the Medicaid Elderly Waiver for the Case Management Program for the Frail Elderly.

DETAIL: Maintains the current allocation and transfer levels.

2 9 b. The monthly cost per client for case management for the  
2 10 frail elderly services provided shall not exceed an average of  
2 11 \$70. However, if the department of human services adopts  
2 12 administrative rules revising the reimbursement methodology to  
2 13 include 15 minute units, 24-hour on-call, and other  
2 14 requirements consistent with federal regulations, the \$70  
2 15 monthly cap shall be eliminated and replaced with a quarterly  
2 16 projection of expenditures and reimbursement revisions  
2 17 necessary to maintain expenditures within the amounts budgeted  
2 18 under the appropriations made for the fiscal year for the  
2 19 medical assistance program.

Limits the maximum cost per client to \$70.00 per member, per month. If the Department of Human Services adopts rules to revise the reimbursement methodology for case management, the \$70.00 cap is eliminated.

2 20 c. The department of human services shall review  
2 21 projections for state funding expenditures for reimbursement  
2 22 of case management services under the medical assistance  
2 23 elderly waiver on a quarterly basis and shall determine if an  
2 24 adjustment to the medical assistance reimbursement rates are  
2 25 necessary to provide reimbursement within the state funding

Requires the Department of Human Services to review expenditure for reimbursement of case management services under the Medicaid Elderly Waiver on a quarterly basis and adjust to provide reimbursements within the appropriation.

2 26 amounts budgeted under the appropriations made for the fiscal  
2 27 year for the medical assistance program. Any temporary  
2 28 enhanced federal financial participation that may become  
2 29 available for the medical assistance program during the fiscal  
2 30 year shall not be used in projecting the medical assistance  
2 31 elderly waiver case management budget. The department of  
2 32 human services shall revise such reimbursement rates as  
2 33 necessary to maintain expenditures for medical assistance  
2 34 elderly waiver case management services within the state  
2 35 funding amounts budgeted under the appropriations made for the  
3 1 fiscal year for the medical assistance program.

3 2 3. Of the funds appropriated in this section, \$179,961  
3 3 shall be transferred to the department of economic development  
3 4 for the Iowa commission on volunteer services to be used for  
3 5 the retired and senior volunteer program.

Requires a transfer of \$179,961 to the Iowa Commission on Volunteer Services in the Department of Economic Development for the Retired Senior Volunteer Program (RSVP).

DETAIL: This is a decrease of \$20,237 compared to the FY 2009 allocation.

3 6 4. The department shall continue the elder abuse  
3 7 initiative program established pursuant to section 231.56A.

Requires the Department to continue the Elder Abuse Initiative.

3 8 5. In addition to any other funds appropriated in this  
3 9 section for these purposes, \$220,000 shall be used to provide  
3 10 for elder unmet home and community-based services needs as  
3 11 identified in reports submitted by the area agencies on aging.

Allocates \$220,000 for unmet home and community-based services needs as identified by the Area Agencies on Aging.

3 12 6. During the fiscal year beginning July 1, 2009,  
3 13 notwithstanding section 231.33, subsection 19, relating to  
3 14 departmental training of area agency on aging boards of  
3 15 directors and section 231.63 relating to the development of  
3 16 end-of-life care information, the department is not required  
3 17 to comply with these requirements if funding is not available.

CODE: Notwithstanding requirements relating to Departmental training of AAA Boards and End of Life Information.

## 3 18 HEALTH

3 19 Sec. 2. DEPARTMENT OF PUBLIC HEALTH. The allocations made  
 3 20 in this section may include amounts carried forward from  
 3 21 appropriations and allocations made for the same purposes in  
 3 22 the previous fiscal year. There is appropriated from the  
 3 23 general fund of the state to the department of public health  
 3 24 for the fiscal year beginning July 1, 2009, and ending June  
 3 25 30, 2010, the following amounts, or so much thereof as is  
 3 26 necessary, to be used for the purposes designated:

## 3 27 1. ADDICTIVE DISORDERS

3 28 For reducing the prevalence of use of tobacco, alcohol, and  
 3 29 other drugs, and treating individuals affected by addictive  
 3 30 behaviors, including gambling, and for not more than the  
 3 31 following full-time equivalent positions:  
 3 32 ..... \$ 28,652,500  
 3 33 ..... FTEs 18.00

General Fund appropriation to Addictive Disorders Programs.

DETAIL: This is a net increase of \$25,616,583 and a net increase of 12.00 FTE positions compared to the estimated net FY 2009 appropriation. An additional \$2,748,692 is provided to Addictive Disorders Programs from the Health Care Trust Fund in Division IV. The General Fund changes include:

- A decrease of \$163,393 for a general reduction for addictive disorders programs.
- A decrease of \$1,000,000 for tobacco use prevention, cessation, and treatment due to available carryforward.
- The following increases were formerly funded by the Healthy Iowans Tobacco Trust (HITT) Fund that has been eliminated:
  - \$6,555,385 for tobacco use prevention, cessation, and treatment.
  - \$13,057,282 for substance abuse treatment.
  - \$993,487 for substance abuse prevention for kids.
- An increase of \$6,173,823 to reflect elimination of the Gambling Treatment Fund.
- An increase of 12.00 FTE positions to adjust for anticipated utilization for FY 2010 and to include FTEs formerly funded from the HITT fund.



3 34 a. Of the funds appropriated in this subsection,  
3 35 \$8,028,214 shall be used for the tobacco use prevention and  
4 1 control initiative, including efforts at the state and local  
4 2 levels, as provided in chapter 142A.

Requires \$8,028,214 to be used for tobacco use prevention, cessation, and treatment.

DETAIL: This is an increase of \$543,344 compared to the FY 2009 allocation to reflect elimination of the HITT Fund.

4 3 (1) The director of public health shall dedicate  
4 4 sufficient resources to promote and ensure retailer compliance  
4 5 with tobacco laws and ordinances relating to persons under 18  
4 6 years of age, and shall prioritize the state's compliance in  
4 7 the allocation of available funds to comply with 42 U.S.C.  
4 8 300x=26 and section 453A.2.

Requires the Director of the Department of Public Health to promote and ensure retailer compliance with tobacco laws.

4 9 (2) Of the full-time equivalent positions authorized in  
4 10 this subsection, 2.00 full-time equivalent positions shall be  
4 11 utilized to provide for enforcement of tobacco laws,  
4 12 regulations, and ordinances under a chapter 28D agreement  
4 13 entered into between the Iowa department of public health and  
4 14 the alcoholic beverages division of the department of  
4 15 commerce.

Requires 2.00 FTE positions to be used jointly by the Department of Public Health and the Alcoholic Beverages Division of the Department of Commerce for enforcement of tobacco laws.

4 16 b. Of the funds appropriated in this subsection,  
4 17 \$17,546,252 shall be used for substance abuse treatment and  
4 18 prevention.

Allocates \$17,546,252 for substance abuse treatment and prevention.

DETAIL: This is a net increase of \$3,746,252 compared to the FY 2009 allocation to reflect elimination of the HITT Fund.

4 19 (1) Of the funds allocated in this lettered paragraph,  
4 20 \$993,487 shall be used for the public purpose of a grant  
4 21 program to provide substance abuse prevention programming for  
4 22 children.

Allocates \$993,487 for substance abuse prevention programs for children.

DETAIL: This is a decrease of \$56,513 compared to the FY 2009 allocation for a general reduction. This allocation was previously funded by the HITT Fund.

4 23 (a) Of the funds allocated in this subparagraph, \$473,100  
4 24 shall be utilized for the public purpose of providing grant

Requires an allocation of \$473,100 for substance abuse prevention programs for children to be used for programs that utilize mentors.

4 25 funding for organizations that provide programming for  
4 26 children by utilizing mentors. Programs approved for such  
4 27 grants shall be certified or will be certified within six  
4 28 months of receiving the grant award by the Iowa commission on  
4 29 volunteer services as utilizing the standards for effective  
4 30 practice for mentoring programs.

Requires the programs that receive this funding to be verified within six months of receiving grants by the Iowa Commission on Volunteer Services as using effective standards for mentoring programs.

DETAIL: This is a decrease of \$26,900 compared to the FY 2009 allocation for a general reduction.

4 31 (b) Of the funds allocated in this subparagraph, \$473,100  
4 32 shall be utilized for the public purpose of providing grant  
4 33 funding for organizations that provide programming that  
4 34 includes youth development and leadership. The programs shall  
4 35 also be recognized as being programs that are scientifically  
5 1 based with evidence of their effectiveness in reducing  
5 2 substance abuse in children.

Requires an allocation of \$473,100 for substance abuse prevention programs for children to be used to provide programs that include youth and character development, and leadership. Requires the programs to be recognized as scientifically-based with evidence of effectiveness in reducing substance abuse in children.

DETAIL: This is a decrease of \$26,900 compared to the FY 2009 allocation for a general reduction.

5 3 (c) The Iowa department of public health shall utilize a  
5 4 request for proposals process to implement the grant program.

Requires the Department of Public Health to issue a Request for Proposals (RFP) to determine grant recipients for the funds appropriated for substance abuse prevention programs for children.

5 5 (d) All grant recipients shall participate in a program  
5 6 evaluation as a requirement for receiving grant funds.

Requires substance abuse prevention programs for children to participate in program evaluations.

5 7 (e) Of the funds allocated for the grant program, \$47,287  
5 8 shall be used to administer substance abuse prevention grants  
5 9 and for program evaluations.

Requires \$47,287 of the amount appropriated for substance abuse prevention programs for children to be used to administer prevention program evaluations.

DETAIL: This is a decrease of \$2,713 compared to the FY 2009 allocation for a general reduction.

5 10 (2) It is the intent of the general assembly that from the  
5 11 moneys allocated in this lettered paragraph persons with a  
5 12 dual diagnosis of substance abuse and gambling addictions  
5 13 shall be given priority in treatment services.

Specifies it is the intent of the General Assembly that individuals with a diagnosis of both substance abuse and gambling addiction are required to be given priority in treatment services from the funds appropriated in this Section.

5 14 c. (1) Of the funds appropriated in this subsection,  
5 15 \$4,078,035 shall be used for funding of gambling treatment,  
5 16 including administrative costs and to provide programs which  
5 17 may include but are not limited to outpatient and follow-up  
5 18 treatment for persons affected by problem gambling,  
5 19 rehabilitation and residential treatment programs, information  
5 20 and referral services, education and preventive services, and  
5 21 financial management services. Of the amount allocated in  
5 22 this lettered paragraph, up to \$100,000 may be used for the  
5 23 licensing of gambling treatment programs as provided in  
5 24 section 135.150.

Allocates \$4,078,035 for gambling addiction treatment.

DETAIL: This is a net increase of \$2,388,035 compared to the FY 2009 allocation to reflect elimination of the Gambling Treatment Fund. Programs that were previously funded by the Gambling Treatment Fund will now be funded by the General Fund. Permits the Department of Public Health to use a maximum of \$100,000 for licensing of gambling treatment programs.

5 25 (2) (a) Notwithstanding any provision to the contrary, to  
5 26 standardize the availability, delivery, cost of delivery, and  
5 27 accountability of gambling and substance abuse treatment  
5 28 services statewide, the department shall continue  
5 29 implementation of a process to create a system for delivery of  
5 30 the treatment services in accordance with the requirements  
5 31 specified in 2008 Iowa Acts, chapter 1187, section 3,  
5 32 subsection 4. To ensure the system provides a continuum of  
5 33 treatment services that best meets the needs of Iowans, the  
5 34 gambling and substance abuse treatment services in an area may  
5 35 be provided either by a single agency or by separate agencies  
6 1 submitting a joint proposal. The process shall be completed  
6 2 by July 1, 2010.

Requires the Department of Public Health to implement a process to create a system for delivery of treatment services. Requires the process to include the establishment of joint licensure for gambling and substance abuse treatment programs. Requires the process to be completed by July 1, 2010.

6 3 (b) From the amounts designated for gambling and substance  
6 4 abuse treatment, the department may use up to \$100,000 for  
6 5 administrative costs to continue developing and implementing  
6 6 the process in accordance with subparagraph division (a).

Permits the Department of Public Health to allocate up to \$100,000 for administrative costs to develop and implement the process in accordance with this Subsection.

6 7 (3) The requirement of section 123.53, subsection 3, is  
6 8 met by the appropriations and allocations made in this Act for  
6 9 purposes of substance abuse treatment and addictive disorders  
6 10 for the fiscal year beginning July 1, 2009.

States that the requirements of Section 123.53, Code of Iowa, are met by the appropriations made in this Act.

6 11 d. The bureau of substance abuse prevention and treatment,  
 6 12 the division of tobacco use prevention and control, and the  
 6 13 office of gambling treatment and prevention shall develop a  
 6 14 strategy to coordinate prevention activities across the  
 6 15 spectrum of addictive disorders in order to maximize  
 6 16 efficiencies and reduce expenditures while meeting the needs  
 6 17 of Iowans. The strategy shall be presented to the individuals  
 6 18 specified in this Act for submission of reports by December  
 6 19 15, 2009.

Requires the Bureau of Substance Abuse Prevention and Treatment, the Division of Tobacco Use, Prevention, and Control, and the Office of Gambling Treatment under the Department of Public Health to develop a strategy to maximize efficiencies and reduce expenditures related to prevention activities.

6 20 2. HEALTHY CHILDREN AND FAMILIES

6 21 For promoting the optimum health status for children,  
 6 22 adolescents from birth through 21 years of age, and families,  
 6 23 and for not more than the following full-time equivalent  
 6 24 positions:

6 25 ..... \$ 2,249,167  
 6 26 ..... FTEs 14.00

General Fund appropriation to the Healthy Children and Families Programs.

DETAIL: This is a net decrease of \$335,669 and 2.00 FTE positions compared to the estimated net FY 2009 appropriation. An additional \$493,574 is provided to the Healthy Children and Families Programs from the Health Care Trust Fund in Division IV. Significant changes to the General Fund appropriation include:

- A decrease of \$98,500 for elimination of State funding for the Iowa Mother's Milk Bank Program.
- A decrease of \$36,928 for elimination of the Child Death Review Team. The responsibilities of the Program are transferred to the State Medical Examiner under the Department of Public Health in Division X.
- A decrease of \$3,546 for elimination of State funding for the Sudden Infant Death Syndrome (SIDS) Autopsies Program.
- A decrease of \$87,771 for elimination of State funding of for dental services for children through the University of Iowa College of Dentistry.
- A decrease of \$108,924 for a general reduction for Healthy Children and Families Programs.
- A decrease of 2.00 FTE positions to reflect anticipated utilization for FY 2010.

6 27 a. Of the funds appropriated in this subsection, not more  
 6 28 than \$570,226 shall be used for the healthy opportunities to

Limits the General Fund amount used to fund the Healthy Opportunities for Parents to Experience Success (HOPES) Program

6 29 experience success (HOPES)=healthy families Iowa (HFI) program  
 6 30 established pursuant to section 135.106. The department shall  
 6 31 transfer the funding allocated for the HOPES=HFI program to  
 6 32 the Iowa empowerment board for distribution and shall assist  
 6 33 the board in managing the contracting for the funding. The  
 6 34 funding shall be distributed to renew the grants that were  
 6 35 provided to the grantees that operated the program during the  
 7 1 fiscal year ending June 30, 2009.

to \$570,226. Requires the Department to transfer this funding to the Iowa Empowerment Board for distribution and management. The funds are required to be distributed to the grantees that received funding in FY 2009.

DETAIL: This is a decrease of \$79,446 compared to the FY 2009 allocation for a general reduction.

7 2 b. Of the funds appropriated in this subsection, \$292,791  
 7 3 shall be used to continue to address the healthy mental  
 7 4 development of children from birth through five years of age  
 7 5 through local evidence-based strategies that engage both the  
 7 6 public and private sectors in promoting healthy development,  
 7 7 prevention, and treatment for children.

Allocates \$292,791 for the Assuring Better Child Health and Development (ABCD II) Program.

DETAIL: This is a decrease of \$40,793 compared to the FY 2009 allocation for a general reduction. An additional \$159,603 is allocated from the appropriation to the Healthy Children and Families Programs from the Health Care Trust Fund in Division IV.

7 8 c. Of the funds appropriated in this subsection, \$35,108  
 7 9 shall be distributed to a statewide dental carrier to provide  
 7 10 funds to continue the donated dental services program  
 7 11 patterned after the projects developed by the national  
 7 12 foundation of dentistry for the handicapped to provide dental  
 7 13 services to indigent elderly and disabled individuals.

Allocates \$35,108 for dental services for indigent elderly and disabled individuals.

DETAIL: This is a decrease of \$4,892 compared to the FY 2009 allocation for a general reduction.

### 7 14 3. CHRONIC CONDITIONS

7 15 For serving individuals identified as having chronic  
 7 16 conditions or special health care needs, and for not more than  
 7 17 the following full-time equivalent positions:  
 7 18 ..... \$ 2,756,236  
 7 19 ..... FTEs 3.00

General Fund appropriation to the Chronic Conditions Programs.

DETAIL: This is a net increase of \$593,584 and a decrease of 2.00 FTE positions compared to the estimated net FY 2009 appropriation. An additional \$891,219 is provided to the Chronic Conditions Programs from the Health Care Trust Fund (HCTF) in Division IV. The changes to the General Fund appropriation include:

- The elimination of State funding of \$59,131 for the Childhood Obesity Program. An appropriation of \$143,643 is provided to the Childhood Obesity Prevention Program from the HCTF in Division IV.
- The elimination of State funding of \$19,700 for the Hepatitis C

		<p>Awareness Program.</p> <ul style="list-style-type: none"> <li>• A general reduction of \$126,722 for Chronic Condition Programs.</li> <li>• Increases that were previously funded by the Healthy Iowans Tobacco Trust (HITT) Fund: <ul style="list-style-type: none"> <li>• \$88,938 for the Phenylketonuria (PKU) Assistance Program.</li> <li>• \$244,579 for the AIDS Drug Assistance Program (ADAP).</li> <li>• \$88,938 for the Epilepsy Education Program.</li> </ul> </li> <li>• An increase of \$324,043 to reflect the consolidation of appropriations to Chronic Conditions from HF 2539 (FY 2008 Health Care Reform Act).</li> <li>• An increase of \$52,639 to restore administrative savings that were decreased in FY 2009.</li> <li>• A decrease of 2.00 FTE positions to reflect anticipated utilization for FY 2010.</li> </ul>
7 20	a. Of the funds appropriated in this subsection, \$176,542	Allocates \$176,542 for Phenylketonuria (PKU) assistance.
7 21	shall be used for grants to individual patients who have	
7 22	phenylketonuria (PKU) to assist with the costs of necessary	DETAIL: This is a net decrease of \$21,958 compared to the
7 23	special foods.	estimated net FY 2009 allocation to reflect the elimination of the HITT Fund. Additionally, a general reduction was applied to the Program.
7 24	b. Of the funds appropriated in this subsection, \$438,018	Allocates \$438,018 for continuation of the two contracts from FY 2009
7 25	is allocated for continuation of the contracts for resource	in the DPH's Brain Injury Services Program.
7 26	facilitator services in accordance with section 135.22B,	
7 27	subsection 9, and for brain injury training services and	DETAIL: This is a decrease of \$54,482 compared to the FY 2009
7 28	recruiting of service providers to increase the capacity	allocation for a general reduction.
7 29	within this state to address the needs of individuals with	
7 30	brain injuries and such individuals' families.	
7 31	c. Of the funds appropriated in this subsection, \$244,579	Allocates \$244,579 to the AIDS Drug Assistance Program (ADAP).
7 32	shall be used as additional funding to leverage federal	
7 33	funding through the federal Ryan White Care Act, Title II,	DETAIL: This is a decrease of \$30,421 from the FY 2009 allocation
7 34	AIDS drug assistance program supplemental drug treatment	for a general reduction. This allocation was previously funded by the
7 35	grants.	HITT Fund.

Allocates \$88,938 for epilepsy education and support.

8 2 shall be used for the public purpose of providing a grant to  
 8 3 an existing national=affiliated organization to provide  
 8 4 education, client=centered programs, and client and family  
 8 5 support for people living with epilepsy and their families.

DETAIL: This is a decrease of \$11,062 compared to the original FY 2009 allocation for a general reduction. This allocation was previously funded by the HITT Fund.

8 6 4. COMMUNITY CAPACITY

8 7 For strengthening the health care delivery system at the  
 8 8 local level, and for not more than the following full=time  
 8 9 equivalent positions:

8 10 ..... \$ 4,116,847  
 8 11 ..... FTEs 21.00

General Fund appropriation to the Community Capacity Programs.

DETAIL: This is a net increase of \$2,422,518 and 9.00 FTE positions compared to the estimated net FY 2009 appropriation. An additional \$2,253,507 is allocated from the appropriation to the Community Capacity Program from the HCTF in Division IV. Changes to the General Fund appropriation include:

- A decrease of \$62,960 for a general reduction.
- An increase of \$1,054,060 for Local Public Health Services. This allocation was previously funded by the HITT Fund.
- An increase of \$1,267,429 to reflect consolidation of the appropriations to Community Capacity from HF 2539 (FY 2008 Health Care Reform Act).
- An increase of \$100,000 for the Department of Public Health's Public Health Modernization initiative. An additional \$61,349 is provided to the initiative from the HCTF in Division IV.
- An increase of \$63,989 to restore administrative savings that were decreased in FY 2009.
- An increase of 9.00 FTE positions to reflect anticipated utilization for FY 2010 and to include FTE positions formerly funded by the HITT Fund.

8 12 a. Of the funds appropriated in this subsection, \$90,000  
 8 13 is allocated for a child vision screening program implemented  
 8 14 through the university of Iowa hospitals and clinics in  
 8 15 collaboration with community empowerment areas.

Requires an allocation of \$90,000 for a Child Vision Screening program through the University of Iowa Hospitals and Clinics in collaboration with Community Empowerment areas.

DETAIL: This is a decrease of \$8,503 compared to the FY 2009 allocation for a general reduction.

8 16 b. Of the funds appropriated in this subsection, \$143,254

Requires an allocation of \$143,254 for a University of Iowa initiative to

8 17 is allocated for continuation of an initiative implemented at  
 8 18 the university of Iowa and \$125,802 is allocated for  
 8 19 continuation of an initiative at the state mental health  
 8 20 institute at Cherokee to expand and improve the workforce  
 8 21 engaged in mental health treatment and services. The  
 8 22 initiatives shall receive input from the university of Iowa,  
 8 23 the department of human services, the department of public  
 8 24 health, and the mental health, mental retardation,  
 8 25 developmental disabilities, and brain injury commission to  
 8 26 address the focus of the initiatives.

expand and improve the mental health treatment and services workforce. Requires an allocation of \$125,802 for the same type of initiative at the Mental Health Institute at Cherokee.

DETAIL: These are decreases compared to the FY 2009 allocations of \$14,056 for the University of Iowa initiative and \$12,343 to the Mental Health Institute at Cherokee for general reductions. The requirement that the Department of Human Services, the Department of Public Health, and the Brain Injury Commission receive regular updates on the workforce initiative at the Mental Health Institute at Cherokee has been removed.

8 27 c. Of the funds appropriated in this subsection,  
 8 28 \$1,054,060 shall be used for essential public health services  
 8 29 that promote healthy aging throughout the lifespan, contracted  
 8 30 through a formula for local boards of health, to enhance  
 8 31 health promotion and disease prevention services.

Requires the Department of Public Health (DPH) to use \$1,054,060 for core public health functions, including home health care and public health nursing services.

DETAIL: This is a decrease of \$1,455,900 for the specified initiatives compared to the original FY 2009 allocation for a general reduction.

8 32 d. Of the funds appropriated in this section, \$100,000  
 8 33 shall be deposited in the governmental public health system  
 8 34 fund created by this Act to be used to further develop the  
 8 35 Iowa public health standards and to begin implementation of  
 9 1 public health modernization in accordance with chapter 135A,  
 9 2 as enacted by this Act, to the extent funding is available.

Permits the Department of Public Health to use \$100,000 for the Public Health Modernization initiative.

DETAIL: This is a new allocation beginning in FY 2010. The allocation will be deposited in the Governmental Public Health System Fund established in Division XI of this Bill.

#### 9 3 5. ELDERLY WELLNESS

9 4 For promotion of healthy aging and optimization of the  
 9 5 health of older adults:

9 6 ..... \$ 8,345,779

General Fund appropriation to the Elderly Wellness Programs.

DETAIL: This is a decrease of \$749,696 compared to the estimated net FY 2009 appropriation for a general reduction.

9 7 a. Of the funds appropriated in this subsection,  
 9 8 \$2,292,076 shall be used for local public health nursing  
 9 9 services.

Allocates \$2,292,076 for the Local Public Health Nursing Program.

DETAIL: Maintains the current level of funding.



9 10 b. Of the funds appropriated in this subsection,  
 9 11 \$6,053,703 shall be used for home care aide services.

Allocates \$6,053,703 for the Home Care Aide Services Program.

DETAIL: This is a decrease of \$749,696 compared to the FY 2009 allocation for a general reduction.

9 12 6. ENVIRONMENTAL HAZARDS  
 9 13 For reducing the public's exposure to hazards in the  
 9 14 environment, primarily chemical hazards, and for not more than  
 9 15 the following full-time equivalent positions:  
 9 16 ..... \$ 1,000,391  
 9 17 ..... FTEs 4.50

General Fund appropriation to the Environmental Hazards Programs.

DETAIL: This is a net increase of \$278,654 and 2.50 FTEs compared to the estimated net FY 2009 appropriation. Changes include:

- A general reduction of \$67,913 for Environmental Hazard Programs.
- An increase of \$262,153 for Environmental Epidemiology. This allocation was previously funded by the HITT Fund.
- An increase of \$69,347 for Childhood Lead Poisoning Prevention. This allocation was previously funded by the HITT Fund.
- An increase of \$15,067 to restore administrative savings that were decreased in FY 2009.
- An increase of 2.50 FTE positions to reflect the FTEs formerly funded by the HITT Fund that will now be funded by the General Fund.

9 18 a. Of the funds appropriated in this subsection, \$601,631  
 9 19 shall be used for childhood lead poisoning provisions.

Requires an allocation of \$601,631 for childhood lead testing.

DETAIL: This is a decrease of \$61,084 compared to the FY 2009 allocation for a general reduction.

9 20 b. Of the funds appropriated in this subsection, not more  
 9 21 than \$262,153 shall be used for the development of scientific  
 9 22 and medical expertise in environmental epidemiology.

Requires an allocation of \$262,153 for Environmental Epidemiology.

DETAIL: This is a decrease of \$26,617 compared to the FY 2009 allocation for a general reduction. This allocation was previously funded by the HITT Fund.

9 23 7. INFECTIOUS DISEASES  
 9 24 For reducing the incidence and prevalence of communicable

General Fund appropriation to the Infectious Diseases Programs.

9 25 diseases, and for not more than the following full-time  
 9 26 equivalent positions:  
 9 27 ..... \$ 1,630,661  
 9 28 ..... FTEs 5.00

DETAIL: This is a decrease of \$1,164,885 and 2.00 FTE positions compared to the estimated net FY 2009 appropriation. Changes include:

- A decrease of \$209,600 for general reductions to Infectious Diseases Programs.
- A decrease of \$992,915 in one-time supplemental funding for FY 2009 for vaccinations used in the 2008 disaster recovery period. The supplemental funding was provided in HF 414 (FY 2009 Appropriation Adjustments Act).
- An increase of \$37,632 to restore administrative savings that were decreased in FY 2009.
- A decrease of 2.00 FTE positions to reflect anticipated utilization for FY 2010.

9 29 8. PUBLIC PROTECTION  
 9 30 For protecting the health and safety of the public through  
 9 31 establishing standards and enforcing regulations, and for not  
 9 32 more than the following full-time equivalent positions:  
 9 33 ..... \$ 3,569,986  
 9 34 ..... FTEs 130.00

General Fund appropriation to the Public Protection Program.

DETAIL: This is a net increase of \$454,771 and 2.00 FTE positions compared to the estimated net FY 2009 appropriation. Changes include:

- A general reduction of \$199,905 for Public Protection Programs.
- A decrease of \$118,247 for the Office of the State Medical Examiner for a general reduction.
- An increase of \$348,245 for Emergency Medical Services. This allocation was previously funded by the HITT Fund.
- An increase of \$539,468 for the State Poison Control Center. This allocation was previously funded by the HITT Fund.
- A decrease of \$179,822 for one-time funding in FY 2009 for startup costs for plumbing and mechanical contractor licensing.
- An increase of \$65,032 to restore administrative savings that were decreased in FY 2009.
- An increase of 2.00 FTE positions to reflect anticipated utilization for FY 2010.

9 35 a. Of the funds appropriated in this subsection, not more  
 10 1 than \$549,240 shall be credited to the emergency medical

Requires \$549,240 to be allocated to the Emergency Medical Services Fund.

10 2 services fund created in section 135.25. Moneys in the  
 10 3 emergency medical services fund are appropriated to the  
 10 4 department to be used for the purposes of the fund.

DETAIL: This is a decrease of \$61,629 compared to the FY 2009 allocation. The funds are used for training and equipment provided through the Emergency Medical Services (EMS) Program.

10 5 b. Of the funds appropriated in this subsection, \$232,477  
 10 6 shall be used for sexual violence prevention programming  
 10 7 through a statewide organization representing programs serving  
 10 8 victims of sexual violence through the department's sexual  
 10 9 violence prevention program. The amount allocated in this  
 10 10 lettered paragraph shall not be used to supplant funding  
 10 11 administered for other sexual violence prevention or victims  
 10 12 assistance programs.

Allocates \$232,477 to provide program funding for children's sexual violence prevention.

DETAIL: This is a decrease of \$26,086 compared to the FY 2009 allocation for a general reduction.

10 13 c. Of the funds appropriated in this subsection, not more  
 10 14 than \$348,244 shall be used for the continuation and support  
 10 15 of a coordinated system of delivery of trauma and emergency  
 10 16 medical services.

Requires an allocation up to a maximum of \$348,244 for Emergency Medical Services (EMS).

DETAIL: This is a decrease of \$39,076 compared to the FY 2009 allocation for a general reduction. This allocation was previously funded by the HITT Fund.

10 17 d. Of the funds appropriated in this subsection, not more  
 10 18 than \$539,467 shall be used for the state poison control  
 10 19 center.

Requires an allocation up to a maximum of \$539,467 for the State Poison Control Center.

DETAIL: This is a decrease of \$60,533 compared to the FY 2009 allocation for a general reduction. This allocation was previously funded by the HITT Fund.

#### 10 20 9. RESOURCE MANAGEMENT

10 21 For establishing and sustaining the overall ability of the  
 10 22 department to deliver services to the public, and for not more  
 10 23 than the following full-time equivalent positions:  
 10 24 ..... \$ 1,062,517  
 10 25 ..... FTEs 10.00

General Fund appropriation to the Resource Management Program.

DETAIL: This is a net decrease of \$131,581 and no change in FTE positions compared to the estimated net FY 2009 appropriation. Changes include:

- A general reduction of \$156,508 for Resource Management.
- An increase of \$24,927 to restore administrative savings that were

decreased in FY 2009.

10 26 The university of Iowa hospitals and clinics under the  
10 27 control of the state board of regents shall not receive  
10 28 indirect costs from the funds appropriated in this section.  
10 29 The university of Iowa hospitals and clinics billings to the  
10 30 department shall be on at least a quarterly basis.

Prohibits the University of Iowa Hospitals and Clinics (UIHC) from receiving indirect cost reimbursement from General Fund appropriations to the Department of Public Health. Requires the UIHC to submit billings on a quarterly basis for FY 2010.

#### 10 31 DEPARTMENT OF VETERANS AFFAIRS

10 32 Sec. 3. DEPARTMENT OF VETERANS AFFAIRS. There is  
10 33 appropriated from the general fund of the state to the  
10 34 department of veterans affairs for the fiscal year beginning  
10 35 July 1, 2009, and ending June 30, 2010, the following amounts,  
11 1 or so much thereof as is necessary, to be used for the  
11 2 purposes designated:

11 3 1. DEPARTMENT OF VETERANS AFFAIRS ADMINISTRATION  
11 4 For salaries, support, maintenance, and miscellaneous  
11 5 purposes, including the war orphans educational assistance  
11 6 fund created in section 35.8, and for not more than the  
11 7 following full-time equivalent positions:  
11 8 ..... \$ 1,067,170  
11 9 ..... FTEs 17.20

General Fund appropriation to the Department of Veteran Affairs.

DETAIL: This is a decrease of \$132,159 and no change in FTE positions compared to the estimated net FY 2009 appropriation for a general reduction of 11.02%.

11 10 2. IOWA VETERANS HOME  
11 11 For salaries, support, maintenance, and miscellaneous  
11 12 purposes:  
11 13 ..... \$ 11,326,650

General Fund appropriation to the Iowa Veterans Home.

DETAIL: This is a decrease of \$3,064,785 compared to the estimated net FY 2009 appropriation for an 11.30% general reduction to reflect the availability of FY 2009 carryforward funding. The Home expects to carryforward between \$5,000,000 and \$6,000,000 from FY 2009 to FY 2010.

The Bill does not cap FTE positions. The tracking document included

with the Bill indicates that there is an increase of 20.76 FTE positions compared to the estimated net FY 2009 FTE positions.

11 14 a. The Iowa veterans home billings involving the  
11 15 department of human services shall be submitted to the  
11 16 department on at least a monthly basis.

Requires the Iowa Veterans Home to submit monthly claims relating to Medicaid to the Department of Human Services.

11 17 b. If there is a change in the employer of employees  
11 18 providing services at the Iowa veterans home under a  
11 19 collective bargaining agreement, such employees and the  
11 20 agreement shall be continued by the successor employer as  
11 21 though there had not been a change in employer.

Requires a new employer to honor an existing collective bargaining agreement at the Iowa Veterans Home.

11 22 c. Commencing with the fiscal year beginning July 1, 2009,  
11 23 the Iowa veterans home shall revise the payment and exemption  
11 24 amounts for residents participating in the incentive therapy  
11 25 program in accordance with all of the following:

Requires the Iowa Veterans Home to adjust the incentive therapy program payment schedule. These are funds provided to residents of the Home for certain work at the Home.

11 26 (1) The incentive therapy payment amount for domiciliary  
11 27 level of care residents shall not exceed \$150 per month and  
11 28 for nursing level of care residents shall not exceed \$75 per  
11 29 month.

11 30 (2) The amounts paid under the program that are exempt  
11 31 from computation of resident support shall be increased to  
11 32 reflect the increases in the incentive therapy payments in  
11 33 accordance with subparagraph (1).

11 34 3. STATE EDUCATIONAL ASSISTANCE == CHILDREN OF DECEASED  
11 35 VETERANS

General Fund appropriation for the State Educational Assistance for Children of Deceased Veterans Program.

12 1 For provision of educational assistance pursuant to section  
12 2 35.9:

DETAIL: This is a decrease of \$2,841 compared to the estimated net FY 2009 appropriation for a general decrease of 11.02%.

12 3 ..... \$ 22,944

12 4 Sec. 4. LIMITATION OF COUNTY COMMISSION OF VETERANS  
12 5 AFFAIRS FUND STANDING APPROPRIATIONS. Notwithstanding the

General Fund appropriation for the County Commissions of Veterans Affairs Fund.

12 6 standing appropriation in the following designated section for  
 12 7 the fiscal year beginning July 1, 2009, and ending June 30,  
 12 8 2010, the amounts appropriated from the general fund of the  
 12 9 state pursuant to that section for the following designated  
 12 10 purposes shall not exceed the following amount:

12 11 For the county commissions of veterans affairs fund under  
 12 12 section 35A.16:

12 13 ..... \$ 1,000,000

DETAIL: This is an increase of \$414,401 compared to the estimated net FY 2009 appropriation. This is in lieu of a new FY 2010 standing appropriation for the same purpose. Each of the 99 counties receives a \$10,000 grant for veteran-related expenditures and \$10,000 is provided to the Department of Veterans Affairs for training expenditures.

#### 12 14 HUMAN SERVICES

##### 12 15 Sec. 5. TEMPORARY ASSISTANCE FOR NEEDY FAMILIES BLOCK

12 16 GRANT. There is appropriated from the fund created in section  
 12 17 8.41 to the department of human services for the fiscal year  
 12 18 beginning July 1, 2009, and ending June 30, 2010, from moneys  
 12 19 received under the federal temporary assistance for needy  
 12 20 families (TANF) block grant pursuant to the federal Personal  
 12 21 Responsibility and Work Opportunity Reconciliation Act of  
 12 22 1996, Pub. L. No. 104=193, and successor legislation, which  
 12 23 are federally appropriated for the federal fiscal years  
 12 24 beginning October 1, 2008, and ending September 30, 2009, and  
 12 25 beginning October 1, 2009, and ending September 30, 2010, the  
 12 26 following amounts, or so much thereof as is necessary, to be  
 12 27 used for the purposes designated:

Temporary Assistance for Needy Families (TANF) FY 2010 Block Grant Fund appropriation.

DETAIL: The federal government implemented Federal Welfare Reform on August 22, 1996. Federal Welfare Reform changed the funding for the Family Investment Program (FIP) from a matching program to a block grant of federal funds. The TANF Program was reauthorized on February 8, 2006, with work participation rates extended to separate State programs and the elimination of high performance bonuses; however, Iowa's grant remains the same at \$131,524,959 per year.

12 28 1. To be credited to the family investment program account  
 12 29 and used for assistance under the family investment program  
 12 30 under chapter 239B:

12 31 ..... \$ 26,106,513

TANF FY 2010 Block Grant appropriation for the Family Investment Program (FIP) Account.

DETAIL: This is an increase of \$5,000 compared to the estimated net FY 2009 appropriation.

12 32 2. To be credited to the family investment program account  
 12 33 and used for the job opportunities and basic skills (JOBS)  
 12 34 program and implementing family investment agreements in  
 12 35 accordance with chapter 239B:

TANF FY 2010 Block Grant appropriation for the PROMISE JOBS Program.

DETAIL: This is a decrease of \$250,000 compared to the estimated net FY 2009 appropriation.

PG	LN	House File 811	Explanation
13	1	..... \$ 13,084,528	
13	2	Notwithstanding section 8.33, not more than 5 percent of	CODE: Requires nonreversion of not more than 5.00% of funds allocated for contract services.
13	3	the moneys designated in this subsection that are allocated by	
13	4	the department for contracted services, other than family	
13	5	self=sufficiency grant services allocated under this	
13	6	subsection, that remain unencumbered or unobligated at the	
13	7	close of the fiscal year shall not revert but shall remain	
13	8	available for expenditure for the purposes designated until	
13	9	the close of the succeeding fiscal year. However, unless such	
13	10	moneys are encumbered or obligated on or before September 30,	
13	11	2010, the moneys shall revert.	
13	12	3. To be used for the family development and	TANF FY 2010 Block Grant appropriation for the Family Development and Self Sufficiency (FaDSS) Program.
13	13	self=sufficiency grant program in accordance with section	
13	14	216A.107:	
13	15	..... \$ 2,998,675	DETAIL: Maintains the current level of TANF support.
13	16	Notwithstanding section 8.33, moneys appropriated in this	CODE: Requires nonreversion of funds allocated for the FaDSS Grant Program.
13	17	subsection that remain unencumbered or unobligated at the	
13	18	close of the fiscal year shall not revert but shall remain	
13	19	available for expenditure for the purposes designated until	
13	20	the close of the succeeding fiscal year. However, unless such	
13	21	moneys are encumbered or obligated on or before September 30,	
13	22	2010, the moneys shall revert.	
13	23	4. For field operations:	TANF FY 2010 Block Grant appropriation for Field Operations.
13	24	..... \$ 18,507,495	
			DETAIL: Maintains the current level of TANF support.
13	25	5. For general administration:	TANF FY 2010 Block Grant appropriation for General Administration.
13	26	..... \$ 3,744,000	
			DETAIL: Maintains the current level of TANF support.
13	27	6. For local administrative costs:	TANF FY 2010 Block Grant appropriation for Local Administrative

13 28 ..... \$ 2,189,830

Costs.

DETAIL: Maintains the current level of TANF support.

13 29 7. For state child care assistance:

13 30 ..... \$ 28,331,177

TANF FY 2010 Block Grant appropriation for Child Care Assistance.

DETAIL: This is an increase of \$445,000 compared to the estimated net FY 2009 appropriation.

13 31 a. Of the funds appropriated in this subsection,  
 13 32 \$18,986,177 shall be transferred to the child care and  
 13 33 development block grant appropriation made by the Eighty-third  
 13 34 General Assembly, 2009 Session, for the federal fiscal year  
 13 35 beginning October 1, 2009, and ending September 30, 2010. Of  
 14 1 this amount, \$200,000 shall be used for provision of  
 14 2 educational opportunities to registered child care home  
 14 3 providers in order to improve services and programs offered by  
 14 4 this category of providers and to increase the number of  
 14 5 providers. The department may contract with institutions of  
 14 6 higher education or child care resource and referral centers  
 14 7 to provide the educational opportunities. Allowable  
 14 8 administrative costs under the contracts shall not exceed 5  
 14 9 percent. The application for a grant shall not exceed two  
 14 10 pages in length.

Requires the (DHS) to use \$200,000 for training of registered child care home providers. Permits the DHS to contract with colleges or child care resource centers and specifies requirements for funding the grants and the application form for the grant.

14 11 b. Any funds appropriated in this subsection remaining  
 14 12 unallocated shall be used for state child care assistance  
 14 13 payments for individuals enrolled in the family investment  
 14 14 program who are employed.

Specifies that any unallocated funds be used for child care assistance for families enrolled in the FIP program.

14 15 8. For mental health and developmental disabilities  
 14 16 community services:

14 17 ..... \$ 4,894,052

TANF FY 2010 Block Grant appropriation for Mental Health and Developmental Disabilities Community Services.

DETAIL: Maintains the current level of TANF support.



14 18 9. For child and family services:  
 14 19 ..... \$ 32,084,430

TANF FY 2010 Block Grant appropriation for Child and Family Services.

DETAIL: Maintains the current level of TANF support.

14 20 10. For child abuse prevention grants:  
 14 21 ..... \$ 250,000

TANF FY 2010 Block Grant appropriation for Child Abuse Prevention Grants.

DETAIL: Maintains the current level of TANF support.

14 22 11. For pregnancy prevention grants on the condition that  
 14 23 family planning services are funded:  
 14 24 ..... \$ 1,930,067

TANF FY 2010 Block Grant appropriation for pregnancy prevention grants if family planning services are funded.

DETAIL: Maintains the current level of TANF support.

14 25 Pregnancy prevention grants shall be awarded to programs in  
 14 26 existence on or before July 1, 2009, if the programs are  
 14 27 comprehensive in scope and have demonstrated positive  
 14 28 outcomes. Grants shall be awarded to pregnancy prevention  
 14 29 programs which are developed after July 1, 2009, if the  
 14 30 programs are comprehensive in scope and are based on existing  
 14 31 models that have demonstrated positive outcomes. Grants shall  
 14 32 comply with the requirements provided in 1997 Iowa Acts,  
 14 33 chapter 208, section 14, subsections 1 and 2, including the  
 14 34 requirement that grant programs must emphasize sexual  
 14 35 abstinence. Priority in the awarding of grants shall be given  
 15 1 to programs that serve areas of the state which demonstrate  
 15 2 the highest percentage of unplanned pregnancies of females of  
 15 3 childbearing age within the geographic area to be served by  
 15 4 the grant.

Requires the recipients of pregnancy prevention grants to meet certain requirements of comprehensiveness and demonstration of positive outcomes. Requires pregnancy prevention grants from the TANF to include the requirement that sexual abstinence be emphasized. Specifies that priority in awarding the grants should be given to programs in areas of the State that have the highest percentage of unplanned adolescent pregnancies of females of childbearing age within the geographic area served by the grant.

15 5 12. For technology needs and other resources necessary to  
 15 6 meet federal welfare reform reporting, tracking, and case  
 15 7 management requirements:  
 15 8 ..... \$ 1,037,186

TANF FY 2010 Block Grant appropriation for federal welfare reform reporting, tracking, and case management technology and resource needs.

DETAIL: Maintains the current level of TANF support.

15 9 13. For the healthy opportunities for parents to  
 15 10 experience success (HOPES) program administered by the  
 15 11 department of public health to target child abuse prevention:  
 15 12 ..... \$ 200,000

TANF FY 2010 Block Grant appropriation for the Healthy Opportunities for Parents to Experience Success (HOPES) Program.

DETAIL: Maintains the current level of TANF support.

15 13 14. To be credited to the state child care assistance  
 15 14 appropriation made in this section to be used for funding of  
 15 15 community-based early childhood programs targeted to children  
 15 16 from birth through five years of age developed by community  
 15 17 empowerment areas as provided in section 28.9:  
 15 18 ..... \$ 7,350,000

TANF FY 2010 Block Grant appropriation to fund community-based programs for children from birth to age five as developed by community empowerment areas.

DETAIL: Maintains the current level of TANF support.

15 19 a. The department shall transfer TANF block grant funding  
 15 20 appropriated and allocated in this subsection to the child  
 15 21 care and development block grant appropriation in accordance  
 15 22 with federal law as necessary to comply with the provisions of  
 15 23 this subsection.

Requires the DHS to transfer TANF funds to the Child Care and Development Block Grant.

15 24 b. Of the amounts appropriated in this section,  
 15 25 \$12,962,008 for the fiscal year beginning July 1, 2009, shall  
 15 26 be transferred to the appropriation of the federal social  
 15 27 services block grant made for that fiscal year.

Requires \$12,962,008 of the federal TANF funds appropriated in this Section to be transferred to the federal Social Services Block Grant appropriation.

DETAIL: Maintains the current level of TANF support.

15 28 c. The department may transfer funds allocated in this  
 15 29 section to the appropriations made in this Act for general  
 15 30 administration and field operations for resources necessary to  
 15 31 implement and operate the services referred to in this section  
 15 32 and those funded in the appropriation made in this division of  
 15 33 this Act for the family investment program from the general  
 15 34 fund of the state.

Permits the DHS to transfer funds to general administration and field operations for costs associated with TANF-funded Programs and the Family Investment Program (FIP).

15 35 Sec. 6. FAMILY INVESTMENT PROGRAM ACCOUNT.  
 16 1 1. Moneys credited to the family investment program (FIP)

Requires funds credited to the Family Investment Program (FIP) Account for FY 2010 to be used as specified.

16 2 account for the fiscal year beginning July 1, 2009, and ending  
 16 3 June 30, 2010, shall be used to provide assistance in  
 16 4 accordance with chapter 239B.

16 5 2. The department may use a portion of the moneys credited  
 16 6 to the FIP account under this section as necessary for  
 16 7 salaries, support, maintenance, and miscellaneous purposes.

Permits the DHS to use FIP funds for various administrative purposes.

16 8 3. The department may transfer funds allocated in this  
 16 9 section to the appropriations in this Act for general  
 16 10 administration and field operations for resources necessary to  
 16 11 implement and operate the services referred to in this section  
 16 12 and those funded in the appropriation made in this division of  
 16 13 this Act for the family investment program from the general  
 16 14 fund of the state.

Permits the DHS to transfer funds to general administration and field operations for costs associated with this Section.

16 15 4. Moneys appropriated in this division of this Act and  
 16 16 credited to the FIP account for the fiscal year beginning July  
 16 17 1, 2009, and ending June 30, 2010, are allocated as follows:

Requires that TANF Block Grant funds appropriated to the FIP Account be allocated as specified.

16 18 a. To be retained by the department of human services to  
 16 19 be used for coordinating with the department of human rights  
 16 20 to more effectively serve participants in the FIP program and  
 16 21 other shared clients and to meet federal reporting  
 16 22 requirements under the federal temporary assistance for needy  
 16 23 families block grant:  
 16 24 ..... \$ 20,000

Allocates \$20,000 to the DHS to be used for administrative services.

DETAIL: Maintains the current level of support.

16 25 b. To the department of human rights for staffing,  
 16 26 administration, and implementation of the family development  
 16 27 and self-sufficiency grant program in accordance with section  
 16 28 216A.107:  
 16 29 ..... \$ 5,266,946

Allocates \$5,266,946 of the FY 2010 General Fund appropriation and TANF funds to the Department of Human Rights for the Family Development and Self-Sufficiency (FaDSS) Grant Program.

DETAIL: This is a decrease of \$296,096 compared to the FY 2009 allocation.

16 30 (1) Of the funds allocated for the family development and  
 16 31 self=sufficiency grant program in this lettered paragraph, not  
 16 32 more than 5 percent of the funds shall be used for the  
 16 33 administration of the grant program.

Specifies that a maximum of 5.00% of the allocation be spent on administration of Family Development and Self-Sufficiency (FaDSS) Program grants.

16 34 (2) The department of human rights may continue to  
 16 35 implement the family development and self=sufficiency grant  
 17 1 program statewide during fiscal year 2009=2010.

Permits the Department of Human Rights to continue to implement the Family Development and Self-Sufficiency Grant Program in FY 2010.

17 2 c. For the diversion subaccount of the FIP account:  
 17 3 ..... \$ 1,814,000

Allocates \$1,814,000 of FY 2010 TANF funds for the FIP Diversion Subaccount.

DETAIL: This is a decrease of \$1,000,000 compared to the FY 2009 allocation.

17 4 A portion of the moneys allocated for the subaccount may be  
 17 5 used for field operations salaries, data management system  
 17 6 development, and implementation costs and support deemed  
 17 7 necessary by the director of human services in order to  
 17 8 administer the FIP diversion program.

Allows a portion of the FIP Diversion funds to be used to administer the FIP Diversion Program.

17 9 d. For the food stamp employment and training program:  
 17 10 ..... \$ 68,059

Allocates \$68,059 of FY 2010 FIP funds to the Food Stamp Employment and Training Program.

DETAIL: Maintains the current level of support.

17 11 The department shall amend the food stamp employment and  
 17 12 training state plan in order to maximize to the fullest extent  
 17 13 permitted by federal law the use of the fifty=fifty match  
 17 14 provisions for the claiming of allowable federal matching  
 17 15 funds from the United States department of agriculture  
 17 16 pursuant to the federal food stamp employment and training  
 17 17 program for providing education, employment, and training  
 17 18 services for eligible food assistance program participants,

Requires the Department to amend the Food Stamp Employment and Training State Plan to maximize federal matching funds received.

17 19 including but not limited to related dependent care and  
17 20 transportation expenses.

17 21 e. For the JOBS program:  
17 22 ..... \$ 21,638,263

Permits the DHS to allocate \$21,638,263 of the FY 2010 General Fund appropriation and TANF funds for the PROMISE JOBS Program.

DETAIL: This is a decrease of \$671,853 compared to the FY 2009 allocation.

17 23 5. Of the child support collections assigned under FIP, an  
17 24 amount equal to the federal share of support collections shall  
17 25 be credited to the child support recovery appropriation made  
17 26 in this division of this Act. Of the remainder of the  
17 27 assigned child support collections received by the child  
17 28 support recovery unit, a portion shall be credited to the FIP  
17 29 account, a portion may be used to increase recoveries, and a  
17 30 portion may be used to sustain cash flow in the child support  
17 31 payments account. If as a consequence of the appropriations  
17 32 and allocations made in this section the resulting amounts are  
17 33 insufficient to sustain cash assistance payments and meet  
17 34 federal maintenance of effort requirements, the department  
18 1 shall seek supplemental funding. If child support collections  
18 2 assigned under FIP are greater than estimated or are otherwise  
18 3 determined not to be required for maintenance of effort, the  
18 4 state share of either amount may be transferred to or retained  
18 5 in the child support payment account.

Requires the federal share of child support collections recovered by the State to be credited to the Child Support Recovery Unit. The remainder of support collected is credited to the FIP account and the DHS is permitted to use a portion to increase recoveries and to sustain cash flow in the child support payments account.

18 5 6. The department may adopt emergency rules for the family  
18 6 investment, JOBS, food stamp, and medical assistance programs  
18 7 if necessary to comply with federal requirements.

Permits the DHS to adopt emergency administrative rules for the FIP, Food Stamp Program, and Medical Assistance Program.

18 8 Sec. 7. FAMILY INVESTMENT PROGRAM GENERAL FUND. There is  
18 9 appropriated from the general fund of the state to the  
18 10 department of human services for the fiscal year beginning

General Fund appropriation to the DHS for the FIP, to be credited to the FIP Account.

18 11 July 1, 2009, and ending June 30, 2010, the following amount,  
 18 12 or so much thereof as is necessary, to be used for the purpose  
 18 13 designated:  
 18 14 To be credited to the family investment program (FIP)  
 18 15 account and used for family investment program assistance  
 18 16 under chapter 239B:  
 18 17 ..... \$ 34,342,700

DETAIL: This is a decrease of \$7,718,201 compared to the estimated net FY 2009 appropriation. The decrease includes:

- \$4,427,475 for a general reduction of 11.30%.
- \$2,600,000 for declining caseload.
- \$691,000 to eliminate the Electronic Benefits Transfer (EBT) retailer fee.

The appropriation for the FIP Account also contains funding for the PROMISE JOBS and FaDSS Programs. The appropriation maintains the current FIP payment levels (maximum grants of \$361 per month for a family with two persons and \$426 for a family with three persons).

18 18 1. Of the funds appropriated in this section, \$8,553,735  
 18 19 is allocated for the JOBS program.

General Fund allocation of \$8,553,735 for the PROMISE JOBS Program.

DETAIL: This is a decrease of \$421,853 compared to the FY 2009 allocation.

18 20 2. Of the funds appropriated in this section, \$2,268,271  
 18 21 is allocated for the family development and self-sufficiency  
 18 22 grant program.

General Fund allocation of \$2,268,271 for the FaDSS Program.

DETAIL: This is a decrease of \$316,096 compared to the FY 2009 allocation.

18 23 3. a. Of the funds appropriated in this section, \$219,423  
 18 24 shall be used for continuation of a grant to an Iowa-based  
 18 25 nonprofit organization with a history of providing tax  
 18 26 preparation assistance to low-income Iowans in order to expand  
 18 27 the usage of the earned income tax credit. The purpose of the  
 18 28 grant is to supply this assistance to underserved areas of the  
 18 29 state. The grant shall be provided to an organization that  
 18 30 has existing national foundation support for supplying such  
 18 31 assistance that can also secure local charitable match  
 18 32 funding.

General Fund allocation of \$219,423 to provide tax preparation help for low-income Iowans.

DETAIL: This is a decrease of \$30,577 compared to the FY 2009 allocation.

18 33 b. The general assembly supports efforts by the  
18 34 organization receiving funding under this subsection to create  
18 35 a statewide earned income tax credit and asset-building  
19 1 coalition to achieve both of the following purposes:  
19 2 (1) Expanding the usage of the tax credit through new and  
19 3 enhanced outreach and marketing strategies, as well as  
19 4 identifying new local sites and human and financial resources.  
19 5 (2) Assessing and recommending various strategies for  
19 6 lowans to develop assets through savings, individual  
19 7 development accounts, financial literacy, antipredatory  
19 8 lending initiatives, informed home ownership, use of various  
19 9 forms of support for work, and microenterprise business  
19 10 development targeted to persons who are self-employed or have  
19 11 fewer than five employees.

Specifies that the General Assembly supports the efforts to create a statewide earned income tax credit and asset-building coalition.

19 12 4. Notwithstanding section 8.39, for the fiscal year  
19 13 beginning July 1, 2009, if necessary to meet federal  
19 14 maintenance of effort requirements or to transfer federal  
19 15 temporary assistance for needy families block grant funding to  
19 16 be used for purposes of the federal social services block  
19 17 grant or to meet cash flow needs resulting from delays in  
19 18 receiving federal funding or to implement, in accordance with  
19 19 this division of this Act, activities currently funded with  
19 20 juvenile court services, county, or community moneys and state  
19 21 moneys used in combination with such moneys, the department of  
19 22 human services may transfer funds within or between any of the  
19 23 appropriations made in this division of this Act and  
19 24 appropriations in law for the federal social services block  
19 25 grant to the department for the following purposes, provided  
19 26 that the combined amount of state and federal temporary  
19 27 assistance for needy families block grant funding for each  
19 28 appropriation remains the same before and after the transfer:  
19 29 a. For the family investment program.  
19 30 b. For child care assistance.  
19 31 c. For child and family services.  
19 32 d. For field operations.

CODE: Specifies that the DHS has the authority to transfer TANF funds to the Social Services Block Grant as necessary to meet Maintenance of Effort requirements.

19 33 e. For general administration.  
 19 34 f. MH/MR/DD/BI community services (local purchase).  
 19 35 This subsection shall not be construed to prohibit the use  
 20 1 of existing state transfer authority for other purposes. The  
 20 2 department shall report any transfers made pursuant to this  
 20 3 subsection to the legislative services agency.

20 4 Sec. 8. CHILD SUPPORT RECOVERY. There is appropriated  
 20 5 from the general fund of the state to the department of human  
 20 6 services for the fiscal year beginning July 1, 2009, and  
 20 7 ending June 30, 2010, the following amount, or so much thereof  
 20 8 as is necessary, to be used for the purposes designated:  
 20 9 For child support recovery, including salaries, support,  
 20 10 maintenance, and miscellaneous purposes, and for not more than  
 20 11 the following full-time equivalent positions:  
 20 12 ..... \$ 13,420,460  
 20 13 ..... FTEs 520.00

General Fund appropriation to the DHS for the Child Support Recovery Unit.

DETAIL: This is a decrease of \$1,662,001 compared to the estimated net FY 2009 appropriation for a general reduction of 11.30% and an increase of 5.00 FTE positions.

20 14 1. The department shall expend up to \$27,032, including  
 20 15 federal financial participation, for the fiscal year beginning  
 20 16 July 1, 2009, for a child support public awareness campaign.  
 20 17 The department and the office of the attorney general shall  
 20 18 cooperate in continuation of the campaign. The public  
 20 19 awareness campaign shall emphasize, through a variety of media  
 20 20 activities, the importance of maximum involvement of both  
 20 21 parents in the lives of their children as well as the  
 20 22 importance of payment of child support obligations.

Requires the DHS to expend up to \$27,032 during FY 2010 for a child support public awareness campaign. The funding limitation includes federal funds. The campaign is to be operated in cooperation with the Office of the Attorney General and is to emphasize parental involvement and financial support.

DETAIL: This is a decrease of \$3,968 compared to the estimated net FY 2009 allocation.

20 23 2. Federal access and visitation grant moneys shall be  
 20 24 issued directly to private not-for-profit agencies that  
 20 25 provide services designed to increase compliance with the  
 20 26 child access provisions of court orders, including but not  
 20 27 limited to neutral visitation sites and mediation services.

Specifies the process for utilization of receipts from federal Access and Visitation Grants.

20 28 3. The appropriation made to the department for child

Permits the DHS to use the appropriation as necessary and draw



20 29 support recovery may be used throughout the fiscal year in the  
 20 30 manner necessary for purposes of cash flow management, and for  
 20 31 cash flow management purposes the department may temporarily  
 20 32 draw more than the amount appropriated, provided the amount  
 20 33 appropriated is not exceeded at the close of the fiscal year.

more than appropriated if needed to solve any cash flow problems, provided the amount appropriated is not exceeded at the end of the fiscal year.

20 34 4. For Iowa orders, notwithstanding section 598.22A and  
 20 35 effective October 1, 2009, support arrearages for which all  
 21 1 rights have been and remain assigned to the department for  
 21 2 time periods prior to October 1, 1997, when a child did not  
 21 3 receive assistance under Title IV=A of the federal Social  
 21 4 Security Act or when a child received foster care services,  
 21 5 are considered satisfied up to the amount of assistance  
 21 6 received or foster care funds expended, and the child support  
 21 7 recovery unit shall update court records accordingly. The  
 21 8 unit shall send information regarding the provisions of this  
 21 9 subsection to the obligor and obligee by regular mail to the  
 21 10 last known address, and any objection by an obligor or an  
 21 11 obligee shall be heard by the district court.

CODE: Retires child support debt owed to the State prior to October 1, 1997.

DETAIL: If the Department wished to continue to collect this debt, the federal government would have required a \$200,000 upgrade to their computer system. The State only collects about \$1,000 per month from the debt owed before October 1, 1997. The debt is owed solely to the State and no parents are owed these funds.

21 12 Sec. 9. MEDICAL ASSISTANCE. There is appropriated from  
 21 13 the general fund of the state to the department of human  
 21 14 services for the fiscal year beginning July 1, 2009, and  
 21 15 ending June 30, 2010, the following amount, or so much thereof  
 21 16 as is necessary, to be used for the purpose designated:  
 21 17 For medical assistance reimbursement and associated costs  
 21 18 as specifically provided in the reimbursement methodologies in  
 21 19 effect on June 30, 2009, except as otherwise expressly  
 21 20 authorized by law, including reimbursement for abortion  
 21 21 services which shall be available under the medical assistance  
 21 22 program only for those abortions which are medically  
 21 23 necessary:  
 21 24 ..... \$678,038,847

General Fund appropriation to the DHS for the Medical Assistance (Medicaid) Program.

DETAIL: This is a net increase of \$32,736,517 compared to the estimated net FY 2009 appropriation. Major increases and decreases include:

- An increase of \$53,356,130 for increases in utilization and enrollment.
- An increase of \$9,000,000 to replace funding for the four Mental Health Institutes phased out from the IowaCare Program.
- An increase of \$7,060,000 for increased clawback payments for Medicare Part D.
- An increase of \$6,038,070 to annualize the Home and Community Based Services Waiver.
- An increase of \$3,819,318 to restore carryforward funds from FY 2008.

- An increase of \$988,923 for Targeted Case Management.
- An increase of \$102,751 for a 5.00% increase for Family Planning Provider rates.
- A decrease of \$500,000 to eliminate funding for the Iowa Health Care Collaborative.
- A decrease of \$50,000 to the Iowa Chronic Care Consortium.
- A decrease of \$6,902,735 to shift General Fund Medicaid funding to the Health Care Trust Fund.
- An increase of \$94,968,712 to reflect a decrease in funding from the Senior Living Trust Fund.
- A decrease of \$85,144,652 to reflect available funds from the 6.20% Federal Medical Assistance Matching Percentage (FMAP) adjustment in the federal American Reinvestment and Recovery Act of 2009.

21 25 1. Medically necessary abortions are those performed under  
21 26 any of the following conditions:

21 27 a. The attending physician certifies that continuing the  
21 28 pregnancy would endanger the life of the pregnant woman.

21 29 b. The attending physician certifies that the fetus is  
21 30 physically deformed, mentally deficient, or afflicted with a  
21 31 congenital illness.

21 32 c. The pregnancy is the result of a rape which is reported  
21 33 within 45 days of the incident to a law enforcement agency or  
21 34 public or private health agency which may include a family  
21 35 physician.

22 1 d. The pregnancy is the result of incest which is reported  
22 2 within 150 days of the incident to a law enforcement agency or  
22 3 public or private health agency which may include a family  
22 4 physician.

22 5 e. Any spontaneous abortion, commonly known as a  
22 6 miscarriage, if not all of the products of conception are  
22 7 expelled.

Specifies conditions that permit the Medical Assistance Program to reimburse providers for abortion services.

DETAIL: This is the same language that has been in the DHS Appropriations Bill for several years.

22 8 2. The department shall utilize not more than \$60,000 of  
22 9 the funds appropriated in this section to continue the

Requires the DHS to use a maximum of \$60,000 of the funds appropriated for Medical Assistance to continue the Acquired Immune

22 10 AIDS/HIV health insurance premium payment program as  
 22 11 established in 1992 Iowa Acts, Second Extraordinary Session,  
 22 12 chapter 1001, section 409, subsection 6. Of the funds  
 22 13 allocated in this subsection, not more than \$5,000 may be  
 22 14 expended for administrative purposes.

Deficiency Syndrome/Human Immunodeficiency Virus (AIDS/HIV)  
 Health Insurance Premium Payment as established during the  
 Second Extraordinary Session in 1992.

DETAIL: Maintains the current level of General Fund support.

22 15 3. Of the funds appropriated in this Act to the department  
 22 16 of public health for addictive disorders, \$950,000 for the  
 22 17 fiscal year beginning July 1, 2009, shall be transferred to  
 22 18 the department of human services for an integrated substance  
 22 19 abuse managed care system. The department shall not assume  
 22 20 management of the substance abuse system in place of the  
 22 21 managed care contractor unless such a change in approach is  
 22 22 specifically authorized in law. The departments of human  
 22 23 services and public health shall work together to maintain the  
 22 24 level of mental health and substance abuse services provided  
 22 25 by the managed care contractor through the Iowa plan for  
 22 26 behavioral health. Each department shall take the steps  
 22 27 necessary to continue the federal waivers as necessary to  
 22 28 maintain the level of services.

Requires \$950,000 from the Substance Abuse Grants appropriation in  
 the Department of Public Health to be transferred to the Medical  
 Assistance Program in the DHS for continuation of the Managed  
 Substance Abuse Treatment Program. Also, requires the DHS to  
 assume management of the Program.

DETAIL: Maintains the current level of General Fund support. The  
 Managed Substance Abuse Treatment Program was funded for the  
 first time in FY 1996.

22 29 4. a. The department shall aggressively pursue options  
 22 30 for providing medical assistance or other assistance to  
 22 31 individuals with special needs who become ineligible to  
 22 32 continue receiving services under the early and periodic  
 22 33 screening, diagnosis, and treatment program under the medical  
 22 34 assistance program due to becoming 21 years of age who have  
 22 35 been approved for additional assistance through the  
 23 1 department's exception to policy provisions, but who have  
 23 2 health care needs in excess of the funding available through  
 23 3 the exception to policy provisions.  
 23 4 b. Of the funds appropriated in this section, \$100,000  
 23 5 shall be used for participation in one or more pilot projects  
 23 6 operated by a private provider to allow the individual or  
 23 7 individuals to receive service in the community in accordance  
 23 8 with principles established in *Olmstead v. L.C.*, 527 U.S. 581

Requires the DHS to aggressively pursue options for assisting special  
 needs individuals that become ineligible for continued services under  
 the Early and Periodic Screening, Diagnosis, and Treatment (EPSDT)  
 Program as a result of turning 21 years of age. The individuals are to  
 have been approved for additional assistance through the DHS  
 exception to policy process, but have health care needs exceeding  
 available funding. This Section requires the Department to allocate  
 \$100,000 to fund one or more pilot projects focused on providing care  
 in the community.

DETAIL: Maintains the current level of General Fund support.

23 9 (1999), for the purpose of providing medical assistance or  
23 10 other assistance to individuals with special needs who become  
23 11 ineligible to continue receiving services under the early and  
23 12 periodic screening, diagnosis, and treatment program under the  
23 13 medical assistance program due to becoming 21 years of age who  
23 14 have been approved for additional assistance through the  
23 15 department's exception to policy provisions, but who have  
23 16 health care needs in excess of the funding available through  
23 17 the exception to the policy provisions.

23 18 5. Of the funds appropriated in this section, up to  
23 19 \$3,050,082 may be transferred to the field operations or  
23 20 general administration appropriations in this Act for  
23 21 operational costs associated with Part D of the federal  
23 22 Medicare Prescription Drug, Improvement, and Modernization Act  
23 23 of 2003, Pub. L. No. 108=173.

Permits the DHS to transfer up to \$3,050,082 to Field Operations or General Administration for implementation costs of the new Medicare Part D prescription drug benefit and low-income subsidy application process.

23 24 6. Of the funds appropriated in this section, not more  
23 25 than \$166,600 shall be used to enhance outreach efforts. The  
23 26 department may transfer funds allocated in this subsection to  
23 27 the appropriations in this division of this Act for general  
23 28 administration, the state children's health insurance program,  
23 29 or medical contracts, as necessary, to implement the outreach  
23 30 efforts.

Prohibits the Department from expending more than \$166,600 for outreach for the Medicaid and hawk-i programs.

23 31 7. Of the funds appropriated in this section, up to  
23 32 \$442,100 may be transferred to the appropriation in this Act  
23 33 for medical contracts to be used for clinical assessment  
23 34 services related to remedial services in accordance with  
23 35 federal law.

Permits a maximum of \$442,100 for Clinical Assessment Services.

DETAIL: Maintains the current allocation level.

24 1 8. A portion of the funds appropriated in this section may  
24 2 be transferred to the appropriations in this division of this  
24 3 Act for general administration, medical contracts, the state  
24 4 children's health insurance program, or field operations to be

Permits the Department to use a portion of the funds appropriated to carry out the Payment Error Rate Measurement (PERM) Program. This brings the Department into compliance with the federal Improper Payments Information Act of 2002.

24 5 used for the state match cost to comply with the payment error  
 24 6 rate measurement (PERM) program for both the medical  
 24 7 assistance and state children's health insurance programs as  
 24 8 developed by the centers for Medicare and Medicaid services of  
 24 9 the United States department of health and human services to  
 24 10 comply with the federal Improper Payments Information Act of  
 24 11 2002, Pub. L. No. 107=300.

24 12 9. It is the intent of the general assembly that the  
 24 13 department continue to implement the recommendations of the  
 24 14 assuring better child health and development initiative II  
 24 15 (ABCDII) clinical panel to the Iowa early and periodic  
 24 16 screening, diagnostic, and treatment services healthy mental  
 24 17 development collaborative board regarding changes to billing  
 24 18 procedures, codes, and eligible service providers.

Specifies legislative intent that the Department continue to implement the recommendations of the ABCD II Clinical Panel for changes to billing procedures, codes, and eligible service providers.

24 19 10. Of the funds appropriated in this section, a  
 24 20 sufficient amount is allocated to supplement the incomes of  
 24 21 residents of nursing facilities, intermediate care facilities  
 24 22 for persons with mental illness, and intermediate care  
 24 23 facilities for persons with mental retardation, with incomes  
 24 24 of less than \$50 in the amount necessary for the residents to  
 24 25 receive a personal needs allowance of \$50 per month pursuant  
 24 26 to section 249A.30A.

Requires the Department to provide residents in nursing facilities, ICF/MRs, and ICF/MIs with a personal needs allowance of \$50 per month.

DETAIL: There are no changes in this provision from FY 2009.

24 27 11. Of the funds appropriated in this section, the  
 24 28 following amounts shall be transferred to appropriations made  
 24 29 in this division of this Act to the state mental health  
 24 30 institutes:  
 24 31 a. Cherokee mental health institute ..... \$ 9,098,425  
 24 32 b. Clarinda mental health institute ..... \$ 1,977,305  
 24 33 c. Independence mental health institute ..... \$ 9,045,894  
 24 34 d. Mount Pleasant mental health institute .... \$ 5,752,587

Transfers funds from the Medical Assistance appropriation to the four Mental Health Institutes.

DETAIL: The funds are transferred to replace funding from the IowaCare Program that is being phased out in FY 2009 and FY 2010.

24 35 12. a. Of the funds appropriated in this section,

Allocates \$2,687,889 for the State match for the disproportionate

25 1 \$2,687,889 is allocated for state match for disproportionate  
25 2 share hospital payment of \$7,321,954 to hospitals that meet  
25 3 both of the following conditions:  
25 4 (1) The hospital qualifies for disproportionate share and  
25 5 graduate medical education payments.  
25 6 (2) The hospital is an Iowa state-owned hospital with more  
25 7 than 500 beds and eight or more distinct residency specialty  
25 8 or subspecialty programs recognized by the American college of  
25 9 graduate medical education.  
25 10 b. Distribution of the disproportionate share payment  
25 11 shall be made on a monthly basis. The total amount of  
25 12 disproportionate share payments including graduate medical  
25 13 education, enhanced disproportionate share, and Iowa  
25 14 state-owned teaching hospital payments shall not exceed the  
25 15 amount of the state's allotment under Pub. L. No. 102=234. In  
25 16 addition, the total amount of all disproportionate share  
25 17 payments shall not exceed the hospital-specific  
25 18 disproportionate share limits under Pub. L. No. 103=66.

share hospital payment of \$7,321,954.

25 19 13. Of the funds appropriated in this section, up to  
25 20 \$4,634,065 may be transferred to the IowaCare account created  
25 21 in section 249J.24.

Transfers up to \$4,634,065 to the IowaCare Program.

25 22 14. Of the funds appropriated in this section, \$200,000  
25 23 shall be used for the Iowa chronic care consortium pursuant to  
25 24 2003 Iowa Acts, chapter 112, section 12, as amended by 2003  
25 25 Iowa Acts, chapter 179, sections 166 and 167.

Allocates \$200,000 to the Iowa Chronic Care Consortium.

DETAIL: This is a decrease of \$50,000 compared to the FY 2009 allocation.

25 26 15. One hundred percent of the nonfederal share of  
25 27 payments to area education agencies that are medical  
25 28 assistance providers for medical assistance-covered services  
25 29 provided to medical assistance-covered children, shall be made  
25 30 from the appropriation made in this section.

Allocates Medicaid funds to Area Education Agencies.

25 31 16. a. Any new or renewed contract entered into by the

Specifies that any new or renewed contract with a third party

25 32 department with a third party to administer behavioral health  
25 33 services under the medical assistance program shall provide  
25 34 that any interest earned on payments from the state during the  
25 35 state fiscal year shall be remitted to the department for  
26 1 deposit in a separate account after the end of the fiscal  
26 2 year.

26 3 b. The department shall continue to maintain a separate  
26 4 account within the medical assistance budget for the deposit  
26 5 of all funds remitted pursuant to a contract with a third  
26 6 party to administer behavioral health services under the  
26 7 medical assistance program established pursuant to 2008 Iowa  
26 8 Acts 1187, section 9, subsection 20. Notwithstanding section  
26 9 8.33, funds remaining in the account that remain unencumbered  
26 10 or unobligated at the end of any fiscal year shall not revert  
26 11 but shall remain available in succeeding fiscal years and  
26 12 shall be used only in accordance with appropriations from the  
26 13 account for health and human services=related purposes.

26 14 c. For the fiscal year beginning July 1, 2009, funds in  
26 15 the separate account are appropriated to the department of  
26 16 human services as state matching funds for the medical  
26 17 assistance program.

26 18 17. The department shall continue to implement the  
26 19 provisions in 2007 Iowa Acts, chapter 218, section 124 and  
26 20 section 126, as amended by 2008 Iowa Acts, chapter 1188,  
26 21 section 55, relating to eligibility for certain persons with  
26 22 disabilities under the medical assistance program in  
26 23 accordance with the federal family opportunity Act.

26 24 18. The department shall add behavior programming, crisis  
26 25 intervention, and mental health outreach services to the home  
26 26 and community=based services mental retardation waiver in  
26 27 order to continue necessary home and community=based services  
26 28 for persons transitioning into the community under the money  
26 29 follows the person grant program.

behavioral health administrator requires interest earned to be remitted to the Department for deposit in a separate account that can only be used for Health and Human Services related activities.

Appropriates remitted funds under the current contract with Magellan Behavioral Health to the Medical Assistance Program.

Requires the Department to continue the implementation of the federal Family Opportunity Act.

DETAIL: The Family Opportunity Act is a Medicaid buy-in Program for children with family income of up to 300.00% of the Federal Poverty Level and meet SSI-eligibility requirements.

Requires the Department to add behavior programming, crisis intervention, and mental health outreach services to the Mental Retardation Waiver under the Home and Community Based Services Waiver Programs.

DETAIL: This change is required to maintain compliance with the

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federal Money Follows the Person Grant.

26 30 19. It is the intent of the general assembly that the Iowa  
26 31 autism council established in section 256.35A shall work with  
26 32 the department of human services to review the option of  
26 33 implementing a home and community-based services waiver for  
26 34 individuals up to 21 years of age with autism under the  
26 35 medical assistance program. The council shall present final  
27 1 recommendations to the general assembly by January 15, 2010.

Requires the Department to review options for implementing a Home and Community Based Waiver for individuals under the age of 21 with autism.

27 2 20. The department shall issue a request for proposals to  
27 3 implement a correct coding initiative for the medical  
27 4 assistance program to promote correct coding of health care  
27 5 services by providers, to evaluate claims submissions, and to  
27 6 prevent improper payment. The department may use a portion of  
27 7 any savings projected to result from the initiative for  
27 8 one-time implementation costs and for on-going costs of the  
27 9 contract to the extent that savings exceed costs of the  
27 10 initiative.

Requires the Department to issue a Request for Proposal (RFP) to implement a correct coding initiative for the Medicaid Program. This will help eliminate any improper payments and save the State money.

27 11 21. The department shall request a medical assistance  
27 12 state plan amendment to be effective July 1, 2010, that  
27 13 specifies the coverage criteria for applied behavioral  
27 14 analysis therapy in the remedial services program. Such  
27 15 coverage criteria shall be based on the best practices in  
27 16 medical literature that have been documented to achieve  
27 17 results.

Requires the Department to submit a State Plan Amendment to cover Applied Behavioral Analysis Therapy in the Remedial Services Program.

27 18 22. The department may issue a request for proposals to  
27 19 implement a transportation brokerage system for administering  
27 20 medical assistance program medical transportation payments and  
27 21 client referrals. Any request for proposals shall be  
27 22 structured to be budget neutral to the state.

Permits the Department to issue a RFP to implement a transportation brokerage system for Medicaid transportation payments and client referrals.



27 23 Sec. 10. HEALTH INSURANCE PREMIUM PAYMENT PROGRAM. There  
 27 24 is appropriated from the general fund of the state to the  
 27 25 department of human services for the fiscal year beginning  
 27 26 July 1, 2009, and ending June 30, 2010, the following amount,  
 27 27 or so much thereof as is necessary, to be used for the purpose  
 27 28 designated:

27 29 For administration of the health insurance premium payment  
 27 30 program, including salaries, support, maintenance, and  
 27 31 miscellaneous purposes, and for not more than the following  
 27 32 full-time equivalent positions:

27 33 ..... \$ 508,011

27 34 ..... FTEs 19.00

General Fund appropriation to the DHS for the Health Insurance Premium Payment (HIPP) Program.

DETAIL: This is a decrease of \$62,913 compared to the estimated net FY 2009 appropriation for a general reduction of 11.30% and a decrease of 2.00 FTE positions.

27 35 Sec. 11. MEDICAL CONTRACTS. There is appropriated from  
 28 1 the general fund of the state to the department of human  
 28 2 services for the fiscal year beginning July 1, 2009, and  
 28 3 ending June 30, 2010, the following amount, or so much thereof  
 28 4 as is necessary, to be used for the purpose designated:

28 5 For medical contracts, including salaries, support,  
 28 6 maintenance, and miscellaneous purposes, and for not more than  
 28 7 the following full-time equivalent positions:

28 8 ..... \$ 13,651,503

28 9 ..... FTEs 6.00

General Fund appropriation to the DHS for Medical Contracts.

DETAIL: This is a net decrease of \$301,564 compared to the estimated net FY 2009 appropriation and no change in FTE positions. Changes include:

- An increase of \$1,298,761 for vendor and contract procurement, inflation, and system changes required by federal law.
- A decrease of \$1,600,325 for a general reduction of 11.30%.

28 10 Sec. 12. STATE SUPPLEMENTARY ASSISTANCE.  
 28 11 1. There is appropriated from the general fund of the  
 28 12 state to the department of human services for the fiscal year  
 28 13 beginning July 1, 2009, and ending June 30, 2010, the  
 28 14 following amount, or so much thereof as is necessary, to be  
 28 15 used for the purpose designated:

28 16 For the state supplementary assistance program:

28 17 ..... \$ 18,412,646

General Fund appropriation to the DHS for State Supplementary Assistance.

DETAIL: This is a net increase of \$80,432 compared to the estimated net FY 2009. Major increases and decreases include:

- An increase of \$2,426,972 to maintain Maintenance of Effort requirements.
- A decrease of \$500,000 to reflect an available carryforward.
- An increase of \$182,381 to replace funding from the Health Iowan's Tobacco Trust Fund.
- A decrease of \$2,028,921 for a general reduction of 11.30%.

28 18 2. The department shall increase the personal needs  
 28 19 allowance for residents of residential care facilities by the  
 28 20 same percentage and at the same time as federal supplemental  
 28 21 security income and federal social security benefits are  
 28 22 increased due to a recognized increase in the cost of living.  
 28 23 The department may adopt emergency rules to implement this  
 28 24 subsection.

Requires the DHS to increase the personal needs allowance of residential care facilities residents at the same rate and time as federal Supplemental Security Income (SSI) and Social Security benefits are increased. Permits the DHS to adopt emergency rules for implementation.

28 25 3. If during the fiscal year beginning July 1, 2009, the  
 28 26 department projects that state supplementary assistance  
 28 27 expenditures for a calendar year will not meet the federal  
 28 28 pass-through requirement specified in Title XVI of the federal  
 28 29 Social Security Act, section 1618, as codified in 42 U.S.C.  
 28 30 1382g, the department may take actions including but not  
 28 31 limited to increasing the personal needs allowance for  
 28 32 residential care facility residents and making programmatic  
 28 33 adjustments or upward adjustments of the residential care  
 28 34 facility or in-home health-related care reimbursement rates  
 28 35 prescribed in this division of this Act to ensure that federal  
 29 1 requirements are met. In addition, the department may make  
 29 2 other programmatic and rate adjustments necessary to remain  
 29 3 within the amount appropriated in this section while ensuring  
 29 4 compliance with federal requirements. The department may  
 29 5 adopt emergency rules to implement the provisions of this  
 29 6 subsection.

Permits the DHS to adjust rates for State Supplementary Assistance to meet federal maintenance of effort requirements. Permits the DHS to adopt emergency rules for implementation.

29 7 Sec. 13. STATE CHILDREN'S HEALTH INSURANCE PROGRAM.  
 29 8 1. There is appropriated from the general fund of the  
 29 9 state to the department of human services for the fiscal year  
 29 10 beginning July 1, 2009, and ending June 30, 2010, the  
 29 11 following amount, or so much thereof as is necessary, to be  
 29 12 used for the purpose designated:  
 29 13 For maintenance of the healthy and well kids in Iowa (hawk=  
 29 14 i) program pursuant to chapter 514I for receipt of federal  
 29 15 financial participation under Title XXI of the federal Social  
 29 16 Security Act, which creates the state children's health

General Fund appropriation to the DHS for the Children's Health Insurance Program, also known as the Healthy and Well Kids in Iowa (hawk-i) Program.

DETAIL: This is a net increase of \$968,978 compared to the estimated net FY 2009 appropriation. Major increases and decreases include:

- An increase of \$276,850 to continue to enroll additional eligible children.
- An increase of \$4,838,432 to replace carryforward funds available

29 17 insurance program:	from FY 2008.
29 18 ..... \$ 14,629,830	<ul style="list-style-type: none"> <li>• An increase of \$219,000 to continue outreach and advertising efforts.</li> <li>• A decrease of \$2,500,000 to reflect available funds in the hawk-i Trust Fund.</li> <li>• A decrease of \$234,282 for an annual FMAP adjustment.</li> <li>• A decrease of \$1,631,022 for a general reduction of 11.30%.</li> </ul>
29 19 2. Of the funds appropriated in this section, \$128,950 is	Allocates \$128,950 to continue an outreach contract with the
29 20 allocated for continuation of the contract for advertising and	Department of Public Health and allocates up to \$90,050 for additional
29 21 outreach with the department of public health and \$90,050 is	advertising and outreach.
29 22 allocated for other advertising and outreach.	
29 23 Sec. 14. CHILD CARE ASSISTANCE. There is appropriated	General Fund appropriation to the DHS for the Child Care Assistance
29 24 from the general fund of the state to the department of human	Programs.
29 25 services for the fiscal year beginning July 1, 2009, and	
29 26 ending June 30, 2010, the following amount, or so much thereof	DETAIL: This is a net decrease of \$2,684,260 compared to the
29 27 as is necessary, to be used for the purpose designated:	estimated net FY 2009 appropriation. Changes include:
29 28 For child care programs:	
29 29 ..... \$ 37,799,472	<ul style="list-style-type: none"> <li>• An increase of \$1,135,646 for annual caseload growth for the Child Care Subsidy Program.</li> <li>• A decrease of \$872,509 to reflect available carryforward from FY 2009.</li> <li>• A decrease of \$445,000 to reflect an increase in federal Temporary Assistance for Needy Families (TANF) funding.</li> <li>• A decrease of \$175,000 for a one-time grant for an exceptional children organization in a single county.</li> <li>• A decrease of \$161,471 to reflect decreased costs for the Quality Rating System (QRS) Program.</li> <li>• A decrease of \$179,175 to reflect an increase in the Federal Medical Assistance Percentage (FMAP) rate.</li> <li>• An increase of \$2,600,000 to replace funding from the Child Care Tax Credit Fund that is being eliminated beginning in FY 2010.</li> <li>• A decrease of \$4,586,751 to implement an across-the-board reduction of 11.32% for Child Care Assistance Programs.</li> </ul>
29 30 1. Of the funds appropriated in this section, \$34,417,754	Allocates \$34,417,754 to provide child care assistance for low-income

29 31 shall be used for state child care assistance in accordance  
29 32 with section 237A.13. It is the intent of the general  
29 33 assembly to appropriate sufficient funding for the state child  
29 34 care assistance program for the fiscal year beginning July 1,  
29 35 2010, in order to avoid establishment of waiting list  
30 1 requirements by the department in the preceding fiscal year in  
30 2 anticipation that enhanced funding under the federal American  
30 3 Recovery and Reinvestment Act of 2009 will not be replaced for  
30 4 the fiscal year beginning July 1, 2010.

employed lowans. Specifies it is the intent of the Legislature to appropriate sufficient funding to the Program in FY 2011 to avoid the DHS beginning a waiting list for services in FY 2010 for FY 2011.

DETAIL: This is a decrease of \$3,225,783 compared to the FY 2009 allocation.

30 5 2. Nothing in this section shall be construed or is  
30 6 intended as or shall imply a grant of entitlement for services  
30 7 to persons who are eligible for assistance due to an income  
30 8 level consistent with the waiting list requirements of section  
30 9 237A.13. Any state obligation to provide services pursuant to  
30 10 this section is limited to the extent of the funds  
30 11 appropriated in this section.

Specifies that assistance from the Child Care Assistance Program is not an entitlement and the State's obligation to provide services is limited to the funds available.

30 12 3. Of the funds appropriated in this section, \$480,453 is  
30 13 allocated for the statewide program for child care resource  
30 14 and referral services under section 237A.26. A list of the  
30 15 registered and licensed child care facilities operating in the  
30 16 area served by a child care resource and referral service  
30 17 shall be made available to the families receiving state child  
30 18 care assistance in that area.

Allocates \$480,453 for the Statewide Child Care Resource and Referral Program. Requires a list of the registered and licensed child care facilities to be made available by Child Care Resource and Referral Programs to families receiving assistance under the Child Care Assistance Program.

DETAIL: This is a decrease of \$45,071 compared to the FY 2009 allocation for a general reduction.

30 19 4. a. Of the funds appropriated in this section,  
30 20 \$1,536,181 is allocated for child care quality improvement  
30 21 initiatives including but not limited to the voluntary quality  
30 22 rating system in accordance with section 237A.30.

Allocates \$1,536,181 for the Quality Rating System (QRS).

DETAIL: This is a decrease of \$144,107 compared to the FY 2009 allocation for a general reduction.

30 23 b. The department shall revise the achievement bonus  
30 24 provisions under the voluntary quality rating system to  
30 25 provide that the bonus amount paid for a provider renewing a

Requires the Department of Human Services to revise the current method of awarding achievement bonuses for participants in the QRS.

30 26 rating at levels 2 through 4 in years subsequent to the  
30 27 initial rating shall not be more than 50 percent of the amount  
30 28 of the initial bonus award. For providers who renew at a  
30 29 lower rating level than previously awarded, the achievement  
30 30 bonus amount shall not be more than 50 percent of the award  
30 31 amount for the lower rating level.

30 32 5. The department may use any of the funds appropriated in  
30 33 this section as a match to obtain federal funds for use in  
30 34 expanding child care assistance and related programs. For the  
30 35 purpose of expenditures of state and federal child care  
31 1 funding, funds shall be considered obligated at the time  
31 2 expenditures are projected or are allocated to the  
31 3 department's service areas. Projections shall be based on  
31 4 current and projected caseload growth, current and projected  
31 5 provider rates, staffing requirements for eligibility  
31 6 determination and management of program requirements including  
31 7 data systems management, staffing requirements for  
31 8 administration of the program, contractual and grant  
31 9 obligations and any transfers to other state agencies, and  
31 10 obligations for decategorization or innovation projects.

Permits funds appropriated for child care to be used as matching funds for federal grants. Specifies that funds are obligated when expenditures are projected or allocated to the DHS regions.

DETAIL: This provision was also in effect for FY 2009.

31 11 6. A portion of the state match for the federal child care  
31 12 and development block grant shall be provided as necessary to  
31 13 meet federal matching funds requirements through the state  
31 14 general fund appropriation made for child development grants  
31 15 and other programs for at-risk children in section 279.51.

Requires a portion of the State match for the federal Child Care and Development Block Grant to be provided from the State appropriation for child development grants and other programs for at-risk children.

31 16 7. Of the funds appropriated in this section, \$1,097,084  
31 17 is transferred to the Iowa empowerment fund from which it is  
31 18 appropriated to be used for professional development for the  
31 19 system of early care, health, and education.

Requires a transfer of \$1,097,084 to the Iowa Empowerment Board for professional development opportunities for individuals working in early care, health, and education.

DETAIL: This is a decrease of \$102,916 compared to the FY 2009 transfer for a general reduction.

31 20 8. Of the funds appropriated in this section, \$175,000  
31 21 shall be allocated to a county with a population of more than  
31 22 300,000 to be used for continuation of a grant to support  
31 23 child care center services provided to children with mental,  
31 24 physical, or emotional challenges in order for the children to  
31 25 remain in a home or family setting.

Requires \$175,000 of the Child Care appropriation to be transferred to Polk County to support child care center services for children with various special needs for a one-time grant.

DETAIL: This is a decrease of \$175,000 compared to the FY 2009 allocation.

31 26 9. Of the amount allocated in subsection 1, \$93,000 shall  
31 27 be used for the public purpose of providing a grant to a  
31 28 neighborhood affordable housing and services organization  
31 29 established in a county with a population of more than  
31 30 350,000, that provides at least 300 apartment units to house  
31 31 more than 1,000 residents, of which more than 80 percent  
31 32 belong to a minority population and at least 95 percent are  
31 33 headed by a single parent and have an income below federal  
31 34 poverty guidelines, to be used for child development  
31 35 programming for children residing in the housing.

Requires \$93,000 to be used for child development programming for children residing in the Oakridge Neighborhood in the city of Des Moines in Polk County.

DETAIL: This is a new appropriation for FY 2010.

32 1 10. The department shall work with personnel of the  
32 2 department, state and local public health departments, child  
32 3 care resource and referral services, extension, and others who  
32 4 visit or inspect child care providers to streamline and  
32 5 eliminate duplication in the inspection processes. The  
32 6 department shall report on or before December 15, 2009, to the  
32 7 persons designated by this division of this Act for submission  
32 8 of reports on the changes made as a result of the work.

Requires the DHS to work with specified entities to eliminate duplication of services related to child care provider inspections. The DHS is to provide a report to the Chairpersons and Ranking Members of the Health and Human Services Appropriation Subcommittee, the Legislative Services Agency, and the Legislative caucus staffs related to changes made by December 15, 2009.

32 9 11. Notwithstanding section 8.33, moneys appropriated in  
32 10 this section or received from the federal appropriations made  
32 11 for the purposes of this section that remain unencumbered or  
32 12 unobligated at the close of the fiscal year shall not revert  
32 13 to any fund but shall remain available for expenditure for the  
32 14 purposes designated until the close of the succeeding fiscal  
32 15 year.

CODE: Requires nonreversion of FY 2009 Child Care Assistance Program funds.

32 16 Sec. 15. JUVENILE INSTITUTIONS. There is appropriated  
 32 17 from the general fund of the state to the department of human  
 32 18 services for the fiscal year beginning July 1, 2009, and  
 32 19 ending June 30, 2010, the following amounts, or so much  
 32 20 thereof as is necessary, to be used for the purposes  
 32 21 designated:

32 22 1. For operation of the Iowa juvenile home at Toledo and  
 32 23 for salaries, support, and maintenance, and for not more than  
 32 24 the following full-time equivalent positions:  
 32 25 ..... \$ 6,754,759  
 32 26 ..... FTEs 125.00

General Fund appropriation to the DHS for the Juvenile Home at Toledo.

DETAIL: This is a decrease of \$836,515 and 1.00 FTE position compared to the estimated net FY 2009 appropriation for the implementation of an 11.01% across-the-board reduction for FY 2010.

32 27 2. For operation of the state training school at Eldora  
 32 28 and for salaries, support, and maintenance, and for not more  
 32 29 than the following full-time equivalent positions:  
 32 30 ..... \$ 10,717,787  
 32 31 ..... FTEs 202.70

General Fund appropriation to the DHS for the State Training School at Eldora.

DETAIL: This is a decrease of \$1,327,300 and no change to FTE positions compared to the estimated net FY 2009 appropriation for the implementation of an 11.31% across-the-board reduction for FY 2010.

32 32 3. A portion of the moneys appropriated in this section  
 32 33 shall be used by the state training school and by the Iowa  
 32 34 juvenile home for grants for adolescent pregnancy prevention  
 32 35 activities at the institutions in the fiscal year beginning  
 33 1 July 1, 2009.

Requires a portion of the funds appropriated for the two juvenile institutions to be used for pregnancy prevention in FY 2010.

DETAIL: This provision was also in effect for FY 2009.

33 2 Sec. 16. CHILD AND FAMILY SERVICES.  
 33 3 1. There is appropriated from the general fund of the  
 33 4 state to the department of human services for the fiscal year  
 33 5 beginning July 1, 2009, and ending June 30, 2010, the  
 33 6 following amount, or so much thereof as is necessary, to be  
 33 7 used for the purpose designated:  
 33 8 For child and family services:  
 33 9 ..... \$ 90,591,451

General Fund appropriation to the DHS for Child and Family Services.

DETAIL: This is a net General Fund increase of \$1,619,722 compared to the estimated net FY 2009 appropriation. Changes include:

- A decrease of \$98,500 to eliminate State funding for a child protection center in Black Hawk County.
- A decrease of \$175,984 for protective child care services for a

- 
- general reduction.
  - A decrease of \$136,895 for the Preparation for Adult Living (PALS) Program for a general reduction.
  - A decrease of \$209,552 for adolescent monitoring services for a general reduction.
  - A decrease of \$78,451 for supervised treatment for a general reduction.
  - A decrease of \$62,579 for school-based supervision services for a general reduction.
  - A decrease of \$49,530 for the Juvenile Drug Courts for a general reduction.
  - A decrease of \$702,673 for family foster care services for a general reduction.
  - A decrease of \$180,126 for foster parent recruitment and retention for a general reduction.
  - An increase of \$375,529 for shelter care beds funding.
  - An increase of \$6,341,653 for group care services.
  - A decrease of \$53,841 for supervised apartment living services for a general reduction.
  - A decrease of \$57,611 for the child welfare information system for a general reduction.
  - A decrease of \$38,006 for child welfare services support for a general reduction.
  - A decrease of \$375,000 to eliminate State funding for technical assistance and quality assurance.
  - An increase of \$3,579,852 for general child welfare services. This allocation was previously funded by the HITT Fund.
  - An increase of \$442,524 to reflect updated estimates to the Foster Care Recovery Fund based on current and projected recovery rates.
  - An increase of \$1,717,753 to restore FY 2008 carryforward funding for decategorization. The FY 2009 allocation was funded with carryforward funds that were allocated to decategorization in prior State fiscal years and would have otherwise reverted to the General Fund after June 30, 2008.
  - An increase of \$100,000 for child welfare provider training.
  - An increase of \$406,391 for foster and adoptive family peer support.
  - A decrease of \$93,271 to reflect updated estimates to Title IV-E



funds based on current eligibility rates and the projected FY 2010 Federal Medical Assistance Percentage (FMAP) rate.

- A decrease of \$146,522 to eliminate State funding for four diversion and mediation pilot projects.
- A decrease of \$312,663 for a general reduction for Child Welfare Programs for FY 2010.

33 10 2. In order to address a reduction of \$5,200,000 from the  
33 11 amount allocated under the appropriation made for the purposes  
33 12 of this section in prior years for purposes of juvenile  
33 13 delinquent graduated sanction services, up to \$5,200,000 of  
33 14 the amount of federal temporary assistance for needy families  
33 15 block grant funding appropriated in this division of this Act  
33 16 for child and family services shall be made available for  
33 17 purposes of juvenile delinquent graduated sanction services.

Allocates \$5,200,000 in Temporary Assistance to Needy Families (TANF) funds for delinquency programs.

DETAIL: Maintains the current allocation level.

33 18 3. The department may transfer funds appropriated in this  
33 19 section as necessary to pay the nonfederal costs of services  
33 20 reimbursed under the medical assistance program, state child  
33 21 care assistance program, or the family investment program  
33 22 which are provided to children who would otherwise receive  
33 23 services paid under the appropriation in this section. The  
33 24 department may transfer funds appropriated in this section to  
33 25 the appropriations made in this division of this Act for  
33 26 general administration and for field operations for resources  
33 27 necessary to implement and operate the services funded in this  
33 28 section.

Permits the DHS to transfer funds appropriated for Child and Family Services to Medicaid, the Family Investment Program (FIP), General Administration, or Field Operations to pay for costs associated with child welfare services in these areas.

33 29 4. a. Of the funds appropriated in this section, up to  
33 30 \$34,280,400 is allocated as the statewide expenditure target  
33 31 under section 232.143 for group foster care maintenance and  
33 32 services. If the department projects that such expenditures  
33 33 for the fiscal year will be less than the target amount  
33 34 allocated in this lettered paragraph, the department may

Allocates up to \$34,280,400 for group care services and maintenance costs.

DETAIL: This is an increase of \$6,204,299 compared to the FY 2009 allocation.

33 35 reallocate the excess to provide additional funding for  
34 1 shelter care or the child welfare emergency services addressed  
34 2 with the allocation for shelter care.

34 3 b. If at any time after September 30, 2009, annualization  
34 4 of a service area's current expenditures indicates a service  
34 5 area is at risk of exceeding its group foster care expenditure  
34 6 target under section 232.143 by more than 5 percent, the  
34 7 department and juvenile court services shall examine all group  
34 8 foster care placements in that service area in order to  
34 9 identify those which might be appropriate for termination. In  
34 10 addition, any aftercare services believed to be needed for the  
34 11 children whose placements may be terminated shall be  
34 12 identified. The department and juvenile court services shall  
34 13 initiate action to set dispositional review hearings for the  
34 14 placements identified. In such a dispositional review  
34 15 hearing, the juvenile court shall determine whether needed  
34 16 aftercare services are available and whether termination of  
34 17 the placement is in the best interest of the child and the  
34 18 community.

Requires the group foster care expenditure target to be reviewed under certain conditions and requires review hearings when appropriate.

34 19 5. In accordance with the provisions of section 232.188,  
34 20 the department shall continue the child welfare and juvenile  
34 21 justice funding initiative during fiscal year 2009=2010. Of  
34 22 the funds appropriated in this section, \$1,717,753 is  
34 23 allocated specifically for expenditure for fiscal year  
34 24 2009=2010 through the decategorization service funding pools  
34 25 and governance boards established pursuant to section 232.188.

Allocates \$1,717,753 for decategorization services.

DETAIL: This is a decrease of \$1,887,247 compared to the original FY 2009 allocation. However, it is an increase of \$1,717,753 in General Funds to restore FY 2008 carryforward funding for decategorization. The FY 2009 allocation was funded with carryforward funds that were allocated to decategorization in prior State fiscal years and would have otherwise reverted to the General Fund after June 30, 2008.

34 26 6. A portion of the funds appropriated in this section may  
34 27 be used for emergency family assistance to provide other  
34 28 resources required for a family participating in a family  
34 29 preservation or reunification project or successor project to  
34 30 stay together or to be reunified.

Permits a portion of the Child and Family Services appropriation to be used for emergency family assistance under specified conditions.

34 31 7. Notwithstanding section 234.35 or any other provision  
 34 32 of law to the contrary, state funding for shelter care shall  
 34 33 be limited to \$7,686,460. The department may continue or  
 34 34 amend shelter care provider contracts to include the child  
 34 35 welfare emergency services for children who might otherwise be  
 35 1 served in shelter care that were implemented pursuant to 2008  
 35 2 Iowa Acts, chapter 1187, section 16, subsection 7.

CODE: Limits State funding for shelter care to \$7,686,460. Permits the Department of Human Services to continue or amend provider contracts to include child welfare emergency services.

DETAIL: This is an increase of \$375,529 compared to the FY 2009 allocation.

35 3 8. Except for federal funds provided by the federal  
 35 4 American Recovery and Reinvestment Act of 2009, federal funds  
 35 5 received by the state during the fiscal year beginning July 1,  
 35 6 2009, as the result of the expenditure of state funds  
 35 7 appropriated during a previous state fiscal year for a service  
 35 8 or activity funded under this section are appropriated to the  
 35 9 department to be used as additional funding for services and  
 35 10 purposes provided for under this section. Notwithstanding  
 35 11 section 8.33, moneys received in accordance with this  
 35 12 subsection that remain unencumbered or unobligated at the  
 35 13 close of the fiscal year shall not revert to any fund but  
 35 14 shall remain available for the purposes designated until the  
 35 15 close of the succeeding fiscal year.

CODE: Requires federal funds received in FY 2010 for the expenditure of State funds in a previous fiscal year to be used for child welfare services. Requires nonreversion of funds through FY 2011.

35 16 9. Of the funds appropriated in this section, at least  
 35 17 \$3,464,856 shall be used for protective child care assistance.

Requires \$3,464,856 to be used for protective child care assistance.

DETAIL: This is an increase of \$175,984 compared to the FY 2009 allocation.

35 18 10. a. Of the funds appropriated in this section, up to  
 35 19 \$2,257,277 is allocated for the payment of the expenses of  
 35 20 court-ordered services provided to juveniles who are under the  
 35 21 supervision of juvenile court services, which expenses are a  
 35 22 charge upon the state pursuant to section 232.141, subsection  
 35 23 4. Of the amount allocated in this lettered paragraph, up to  
 35 24 \$1,556,287 shall be made available to provide school-based  
 35 25 supervision of children adjudicated under chapter 232, of

Provides the following allocations related to court-ordered services for juveniles:

- Allocates up to \$2,257,277 for court-ordered services provided to children that are under the supervision of juvenile court services. This is a decrease of \$819,722 compared to the FY 2009 allocation.
- Allocates \$1,556,287 for school-based supervision of delinquent children, limits training funds to \$15,000, and requires a portion of

35 26 which not more than \$15,000 may be used for the purpose of  
 35 27 training. A portion of the cost of each school-based liaison  
 35 28 officer shall be paid by the school district or other funding  
 35 29 source as approved by the chief juvenile court officer.  
 35 30 b. Of the funds appropriated in this section, up to  
 35 31 \$819,722 is allocated for the payment of the expenses of  
 35 32 court-ordered services provided to children who are under the  
 35 33 supervision of the department, which expenses are a charge  
 35 34 upon the state pursuant to section 232.141, subsection 4.

the cost for school-based liaisons to be paid by school districts.  
 Maintains the current level of General Fund support.

- Allocates \$819,722 for court-ordered services provided to children that are under the supervision of the Department of Human Services. This is a decrease of \$20,723 compared to the FY 2009 allocation for a general reduction.

35 35 c. Notwithstanding section 232.141 or any other provision  
 36 1 of law to the contrary, the amounts allocated in this  
 36 2 subsection shall be distributed to the judicial districts as  
 36 3 determined by the state court administrator and to the  
 36 4 department's service areas as determined by the administrator  
 36 5 of the department's division of child and family services.  
 36 6 The state court administrator and the division administrator  
 36 7 shall make the determination of the distribution amounts on or  
 36 8 before June 15, 2009.

CODE: Requires allocations to the DHS districts to be made according to a formula determined by the State Court Administrator by June 15, 2009.

36 9 d. Notwithstanding chapter 232 or any other provision of  
 36 10 law to the contrary, a district or juvenile court shall not  
 36 11 order any service which is a charge upon the state pursuant to  
 36 12 section 232.141 if there are insufficient court-ordered  
 36 13 services funds available in the district court or departmental  
 36 14 service area distribution amounts to pay for the service. The  
 36 15 chief juvenile court officer and the departmental service area  
 36 16 manager shall encourage use of the funds allocated in this  
 36 17 subsection such that there are sufficient funds to pay for all  
 36 18 court-related services during the entire year. The chief  
 36 19 juvenile court officers and departmental service area managers  
 36 20 shall attempt to anticipate potential surpluses and shortfalls  
 36 21 in the distribution amounts and shall cooperatively request  
 36 22 the state court administrator or division administrator to  
 36 23 transfer funds between the judicial districts' or departmental  
 36 24 service areas' distribution amounts as prudent.

CODE: Prohibits a court from ordering any service that is a charge to the State if there are insufficient funds to reimburse the service. Requires the Chief Juvenile Court Officer to use the funds in a manner that will cover the entire fiscal year and permits funds to be transferred between districts.

36 25 e. Notwithstanding any provision of law to the contrary, a  
36 26 district or juvenile court shall not order a county to pay for  
36 27 any service provided to a juvenile pursuant to an order  
36 28 entered under chapter 232 which is a charge upon the state  
36 29 under section 232.141, subsection 4.

CODE: Prohibits a district or juvenile court from ordering a county to pay for a service provided to a juvenile that is a charge to the State.

36 30 f. Of the funds allocated in this subsection, not more  
36 31 than \$100,000 may be used by the judicial branch for  
36 32 administration of the requirements under this subsection.

Prohibits expenditure of more than \$100,000 by the Judicial Branch for administration related to court-ordered services.

36 33 11. Of the funds appropriated in this section, \$1,005,166  
36 34 shall be transferred to the department of public health to be  
36 35 used for the child protection center grant program in  
37 1 accordance with section 135.118.

Requires an allocation of \$1,005,166 to be transferred to the Department of Public Health for a Child Protection Center Grant Program.

DETAIL: This is a decrease of \$19,530 compared to the estimated net FY 2009 allocation for a general reduction.

37 2 12. If the department receives federal approval to  
37 3 implement a waiver under Title IV-E of the federal Social  
37 4 Security Act to enable providers to serve children who remain  
37 5 in the children's families and communities, for purposes of  
37 6 eligibility under the medical assistance program, children who  
37 7 participate in the waiver shall be considered to be placed in  
37 8 foster care.

Requires children that receive in-home or community-based services under a federal Title IV-E waiver to be considered as placed in foster care in order to remain eligible for Medicaid, if the DHS receives federal approval to implement the waiver.

37 9 13. Of the funds appropriated in this section, \$2,695,256  
37 10 is allocated for the preparation for adult living program  
37 11 pursuant to section 234.46.

Allocates \$2,695,256 for the Preparation for Adult Living Services (PALS) Program.

DETAIL: This is a decrease of \$136,895 compared to the FY 2009 allocation for a general reduction.

37 12 14. Of the funds appropriated in this section, \$975,162  
37 13 shall be used for juvenile drug courts. The amount allocated

Allocates a total of \$975,162 for juvenile drug courts. Of this amount, a total of \$485,325 is allocated for Judicial Branch staff costs, and

37 14	in this subsection shall be distributed as follows:	\$489,837 is allocated for juvenile drug court services for juveniles and their families.
37 15	a. To the judicial branch for salaries to assist with the	
37 16	operation of juvenile drug court programs operated in the	
37 17	following jurisdictions:	DETAIL: This is a decrease of \$49,534 compared to the FY 2009 allocation for a general reduction.
37 18	(1) Marshall county:	
37 19	..... \$ 58,509	
37 20	(2) Woodbury county:	
37 21	..... \$ 117,267	
37 22	(3) Polk county:	
37 23	..... \$ 182,779	
37 24	(4) The third judicial district:	
37 25	..... \$ 63,385	
37 26	(5) The eighth judicial district:	
37 27	..... \$ 63,385	
37 28	b. For court-ordered services to support substance abuse	
37 29	services provided to the juveniles participating in the	
37 30	juvenile drug court programs listed in paragraph "a" and the	
37 31	juveniles' families:	
37 32	..... \$ 489,837	
37 33	The state court administrator shall allocate the funding	
37 34	designated in this paragraph among the programs.	
37 35	15. Of the funds appropriated in this section, \$224,288	Requires an allocation of \$224,288 for Project Harmony.
38 1	shall be used for the public purpose of providing a grant to a	
38 2	nonprofit human services organization providing services to	DETAIL: This is a decrease of \$1,241 compared to the FY 2009 allocation.
38 3	individuals and families in multiple locations in southwest	
38 4	Iowa and Nebraska for support of a project providing	
38 5	immediate, sensitive support and forensic interviews, medical	
38 6	exams, needs assessments, and referrals for victims of child	
38 7	abuse and their nonoffending family members.	
38 8	16. Of the funds appropriated in this section, \$123,923 is	Requires an allocation of \$123,923 to provide support for chapters for the ELEVATE support group for foster care children.
38 9	allocated for the elevate approach of providing a support	
38 10	network to children placed in foster care.	DETAIL: This is a decrease of \$6,294 compared to the FY 2009 allocation for a general reduction.

38 11 17. Of the funds appropriated in this section, \$227,987 is  
38 12 allocated for use pursuant to section 235A.1 for continuation  
38 13 of the initiative to address child sexual abuse implemented  
38 14 pursuant to 2007 Iowa Acts, chapter 218, section 18,  
38 15 subsection 21.

Allocates \$227,987 for an initiative to address child sexual abuse.

DETAIL: This is an increase of \$27,987 compared to the FY 2009 allocation.

38 16 18. Of the funds appropriated in this section, \$75,741 is  
38 17 allocated for the public purpose of renewing of a grant to a  
38 18 county with a population between 189,000 and 196,000 in the  
38 19 latest preceding certified federal census for implementation  
38 20 of the county's runaway treatment plan under section 232.195.

Allocates \$75,741 for a Linn County Juvenile Runaway Program.

DETAIL: This is a decrease of \$3,847 compared to the FY 2009 allocation for a general reduction.

38 21 19. Of the funds appropriated in this section, \$590,780 is  
38 22 allocated for the community partnership for child protection  
38 23 sites.

Allocates \$590,780 for the child welfare Community Partnership for Child Protection sites.

DETAIL: This is a decrease of \$30,006 compared to the FY 2009 allocation for a general reduction.

38 24 20. Of the funds appropriated in this section, \$355,036 is  
38 25 allocated for the department's minority youth and family  
38 26 projects under the redesign of the child welfare system.

Allocates \$355,036 for minority youth and family projects included in child welfare redesign.

DETAIL: This is a decrease of \$18,033 compared to the FY 2009 allocation for a general reduction.

38 27 21. Of the funds appropriated in this section, \$281,217 is  
38 28 allocated for funding of the state match for the federal  
38 29 substance abuse and mental health services administration  
38 30 (SAMHSA) system of care grant.

Allocates \$281,217 for the State match for the federal Substance Abuse and Mental Health Services Administration system of care grant.

DETAIL: This is a decrease of \$14,283 compared to the FY 2009 allocation for a general reduction.

38 31 22. Of the funds appropriated in this section, \$23,792 is  
38 32 allocated for the public purpose of providing a grant to a  
38 33 child welfare services provider headquartered in a county with

Allocates \$23,792 to Four Oaks for various autism spectrum disorders services.

DETAIL: This is a decrease of \$1,208 compared to the FY 2009

38 34 a population between 189,000 and 196,000 in the latest  
 38 35 preceding certified federal census that provides multiple  
 39 1 services including but not limited to a psychiatric medical  
 39 2 institution for children, shelter, residential treatment,  
 39 3 after school programs, school-based programming, and an  
 39 4 Asperger's syndrome program, to be used for support services  
 39 5 for children with autism spectrum disorder and their families.

allocation for a general reduction.

39 6 23. Of the funds appropriated in this section, \$125,000 is  
 39 7 allocated for continuation of the contracts for the  
 39 8 multidimensional treatment level foster care program  
 39 9 established pursuant to 2006 Iowa Acts, chapter 1123, for an  
 39 10 additional year. The contractor shall provide a 25 percent  
 39 11 match to receive the funds and shall submit a report on the  
 39 12 program to the persons designated by this division of this Act  
 39 13 for submission of reports.

Allocates \$125,000 for the Multi-Dimensional Foster Care Treatment Level Program. Requires the DHS to continue the fourth year of the pilot Program with the same contractors. Requires the contractors to provide a 25.00% match and to report on their progress.

DETAIL: This is a decrease of \$78,000 compared to the FY 2009 allocation.

39 14 Sec. 17. The department of human services shall work  
 39 15 jointly with the juvenile court and juvenile court services in  
 39 16 studying the provision of child abuse information to juvenile  
 39 17 court services concerning children under the supervision of  
 39 18 juvenile court services, barriers to timely provision of the  
 39 19 information, and how the provision of the information can be  
 39 20 improved. A final report with findings and recommendations  
 39 21 shall be submitted to the governor, supreme court, and general  
 39 22 assembly, on or before December 15, 2009.

Directs the DHS, Juvenile Courts, and the Juvenile Court Services to study barriers to communication relating to child abuse information and to provide a report to the Governor, Supreme Court, and the General Assembly by December 15, 2009.

39 23 Sec. 18. ADOPTION SUBSIDY.  
 39 24 1. There is appropriated from the general fund of the  
 39 25 state to the department of human services for the fiscal year  
 39 26 beginning July 1, 2009, and ending June 30, 2010, the  
 39 27 following amount, or so much thereof as is necessary, to be  
 39 28 used for the purpose designated:  
 39 29 For adoption subsidy payments and services:  
 39 30 ..... \$ 34,883,674

General Fund appropriation to the DHS for the Adoption Subsidy Program.

DETAIL: This is a net increase of \$1,227,335 compared to the estimated net FY 2009 appropriation. Changes include:

- An increase of \$1,382,019 to fund the supplemental need from FY 2009 in FY 2010.
- An increase of \$2,054,689 for caseload growth expected in FY



2010.

- A decrease of \$437,589 to reflect the change in the Federal Medical Assistance Percentage (FMAP) rate.
- A decrease of \$1,771,784 to implement an across-the-board reduction of 5.26% for FY 2010.

39 31 2. The department may transfer funds appropriated in this  
39 32 section to the appropriation made in this Act for general  
39 33 administration for costs paid from the appropriation relating  
39 34 to adoption subsidy.

Permits the DHS to transfer funds for adoption recruitment and services.

39 35 3. Except for federal funds provided by the federal  
40 1 American Recovery and Reinvestment Act of 2009, federal funds  
40 2 received by the state during the fiscal year beginning July 1,  
40 3 2009, as the result of the expenditure of state funds during a  
40 4 previous state fiscal year for a service or activity funded  
40 5 under this section are appropriated to the department to be  
40 6 used as additional funding for the services and activities  
40 7 funded under this section. Notwithstanding section 8.33,  
40 8 moneys received in accordance with this subsection that remain  
40 9 unencumbered or unobligated at the close of the fiscal year  
40 10 shall not revert to any fund but shall remain available for  
40 11 expenditure for the purposes designated until the close of the  
40 12 succeeding fiscal year.

CODE: Requires federal funds received in FY 2010 for the expenditure of State funds in a previous fiscal year to be used for Adoption Subsidy. Requires nonreversion of funds in this Subsection until the close of FY 2011.

40 13 4. The department shall review the potential outcomes of  
40 14 instituting a policy of suspending all or a portion of  
40 15 adoption subsidy payments during a period that a child for  
40 16 whom payments are provided is placed by the court in a  
40 17 placement other than the adoptive family. The department  
40 18 shall report on the review on or before December 15, 2009,  
40 19 providing findings and recommendations, to the persons  
40 20 designated by this division of this Act for submission of  
40 21 reports.

Requires the DHS to review potential outcomes to suspending adoption subsidy payments when a child is placed by a court in a placement other than an adoptive family and to report those findings to the Chairs and Ranking Members of the Health and Human Services Appropriations Subcommittee, the Legislative Services Agency, and the Legislative caucus staffs by December 15, 2009.

40 22 Sec. 19. JUVENILE DETENTION HOME FUND. Moneys deposited  
 40 23 in the juvenile detention home fund created in section 232.142  
 40 24 during the fiscal year beginning July 1, 2009, and ending June  
 40 25 30, 2010, are appropriated to the department of human services  
 40 26 for the fiscal year beginning July 1, 2009, and ending June  
 40 27 30, 2010, for distribution of an amount equal to a percentage  
 40 28 of the costs of the establishment, improvement, operation, and  
 40 29 maintenance of county or multicounty juvenile detention homes  
 40 30 in the fiscal year beginning July 1, 2008. Moneys  
 40 31 appropriated for distribution in accordance with this section  
 40 32 shall be allocated among eligible detention homes, prorated on  
 40 33 the basis of an eligible detention home's proportion of the  
 40 34 costs of all eligible detention homes in the fiscal year  
 40 35 beginning July 1, 2008. The percentage figure shall be  
 41 1 determined by the department based on the amount available for  
 41 2 distribution for the fund. Notwithstanding section 232.142,  
 41 3 subsection 3, the financial aid payable by the state under  
 41 4 that provision for the fiscal year beginning July 1, 2009,  
 41 5 shall be limited to the amount appropriated for the purposes  
 41 6 of this section.

CODE: Requires funds deposited in the Juvenile Detention Fund to be distributed to the Juvenile Detention Centers.

DETAIL: It is estimated that the fines that are deposited in the Fund will be approximately \$4,000,000 in FY 2009. Fines in the Fund will be allocated to the detention centers based the on FY 2010 projected budgets.

41 7 Sec. 20. FAMILY SUPPORT SUBSIDY PROGRAM.  
 41 8 1. There is appropriated from the general fund of the  
 41 9 state to the department of human services for the fiscal year  
 41 10 beginning July 1, 2009, and ending June 30, 2010, the  
 41 11 following amount, or so much thereof as is necessary, to be  
 41 12 used for the purpose designated:  
 41 13 For the family support subsidy program:  
 41 14 ..... \$ 1,697,137

General Fund appropriation for the Family Support Program.

DETAIL: This is a decrease of \$210,175 compared to the estimated net FY 2009 appropriation to reflect the implementation of an 11.01% across-the-board reduction for FY 2010.

41 15 2. The department shall use at least \$385,475 of the  
 41 16 moneys appropriated in this section for the family support  
 41 17 center component of the comprehensive family support program  
 41 18 under section 225C.47. Not more than \$25,000 of the amount  
 41 19 allocated in this subsection shall be used for administrative  
 41 20 costs.

Requires an allocation of \$385,475 from the Family Support Subsidy appropriation to continue the Children-at-Home Program in current counties. Also, permits the DHS to expand the Program to additional counties if funds are available, and limits administrative funding to \$25,000.

DETAIL: This is a decrease of \$47,737 compared to the FY 2009 allocation for a general reduction. Increases the administrative cap on expenses by \$5,000 compared to the FY 2009 allocation.

41 21 Sec. 21. CONNER DECREE. There is appropriated from the  
 41 22 general fund of the state to the department of human services  
 41 23 for the fiscal year beginning July 1, 2009, and ending June  
 41 24 30, 2010, the following amount, or so much thereof as is  
 41 25 necessary, to be used for the purpose designated:  
 41 26 For building community capacity through the coordination  
 41 27 and provision of training opportunities in accordance with the  
 41 28 consent decree of Conner v. Branstad, No. 4=86=CV=30871(S.D.  
 41 29 Iowa, July 14, 1994):  
 41 30 ..... \$ 37,358

General Fund appropriation to the DHS for Conner Decree training requirements.

DETAIL: This is a decrease of \$4,626 compared to the estimated net FY 2009 appropriation. The funds are used for training purposes to comply with the Conner v. Branstad court decision mandating placement of persons in the least restrictive setting.

41 31 Sec. 22. MENTAL HEALTH INSTITUTES.  
 41 32 1. There is appropriated from the general fund of the  
 41 33 state to the department of human services for the fiscal year  
 41 34 beginning July 1, 2009, and ending June 30, 2010, the  
 41 35 following amounts, or so much thereof as is necessary, to be  
 42 1 used for the purposes designated:  
 42 2 a. For the state mental health institute at Cherokee for  
 42 3 salaries, support, maintenance, and miscellaneous purposes,  
 42 4 and for not more than the following full=time equivalent  
 42 5 positions:  
 42 6 ..... \$ 5,436,076  
 42 7 ..... FTEs 205.00

General Fund appropriation to the Mental Health Institute at Cherokee.

DETAIL: This is a decrease of \$673,209 compared to the estimated net FY 2009 appropriation for a general reduction of 11.30% and a decrease of 5.00 FTE positions.

42 8 b. For the state mental health institute at Clarinda for  
 42 9 salaries, support, maintenance, and miscellaneous purposes,  
 42 10 and for not more than the following full=time equivalent  
 42 11 positions:  
 42 12 ..... \$ 6,227,335  
 42 13 ..... FTEs 114.95

General Fund appropriation to the Mental Health Institute at Clarinda.

DETAIL: This is a decrease of \$1,071,196 compared to the estimated net FY 2009 appropriation and no change to FTE positions. This includes:

- A decrease of \$266,940 to eliminate the mobile Alzheimer's unit.

- A decrease of \$804,256 for a general reduction of 11.30%.

42 14 c. For the state mental health institute at Independence  
 42 15 for salaries, support, maintenance, and miscellaneous  
 42 16 purposes, and for not more than the following full-time  
 42 17 equivalent positions:  
 42 18 ..... \$ 9,503,567  
 42 19 ..... FTEs 287.85

General Fund appropriation to the Mental Health Institute at Independence.

DETAIL: This is a decrease of \$1,190,291 compared to the estimated net FY 2009 appropriation for a general reduction of 11.30% and an increase of 0.19 FTE position.

42 20 d. For the state mental health institute at Mount Pleasant  
 42 21 for salaries, support, maintenance, and miscellaneous  
 42 22 purposes, and for not more than the following full-time  
 42 23 equivalent positions:  
 42 24 ..... \$ 1,795,552  
 42 25 ..... FTEs 116.44

General Fund appropriation to the Mental Health Institute at Mount Pleasant.

DETAIL: This is a decrease of \$227,456 compared to the estimated net FY 2009 appropriation for a general reduction of 11.30% and no change in FTE positions.

42 26 2. The department shall submit a proposal for closing one  
 42 27 state mental health institute and consolidating the services  
 42 28 provided at the other state mental health institutes. The  
 42 29 proposal shall provide for maintaining the existing levels of  
 42 30 beds and services after the consolidation. The proposal shall  
 42 31 be submitted to the persons designated by this division of  
 42 32 this Act for submission of reports on or before December 15,  
 42 33 2009.

Requires the Department to submit a proposal to close one State Mental Health Institute (MHI) and consolidate services provided without reducing the total number of beds currently available.

42 34 3. The department shall staff a task force appointed by  
 42 35 the governor consisting of knowledgeable citizens to perform  
 43 1 an in-depth review of the four state mental health institutes,  
 43 2 services provided, public benefits of the services provided,  
 43 3 economic effects connected to the presence of the institutes  
 43 4 that are realized by the communities in the areas served and  
 43 5 the families of personnel, and other public costs and benefits  
 43 6 associated with the presence and availability of the four

Requires the Department to staff a task force appointed by the Governor to review the four State Mental Health Institutes. Requires a report by December 15, 2009.

43 7 institutes. The task force shall submit a report providing  
43 8 findings and recommendations to the governor and general  
43 9 assembly on or before December 15, 2009.

43 10 Sec. 23. STATE RESOURCE CENTERS.

43 11 1. There is appropriated from the general fund of the  
43 12 state to the department of human services for the fiscal year  
43 13 beginning July 1, 2009, and ending June 30, 2010, the  
43 14 following amounts, or so much thereof as is necessary, to be  
43 15 used for the purposes designated:

43 16 a. For the state resource center at Glenwood for salaries,  
43 17 support, maintenance, and miscellaneous purposes:  
43 18 ..... \$ 17,620,487

General Fund appropriation to the State Resource Center at  
Glenwood.

DETAIL: This is a decrease of \$1,283,277 and an increase of 8.36  
FTE positions compared to the estimated net FY 2009 appropriation.  
The change includes:

- A decrease of \$383,311 to reflect the appropriate FMAP rate.
- A decrease of \$894,966 for a general reduction of 4.80%.

The FTE positions are not capped in the Bill.

43 19 b. For the state resource center at Woodward for salaries,  
43 20 support, maintenance, and miscellaneous purposes:  
43 21 ..... \$ 10,929,200

General Fund appropriation to the State Resource Center at  
Woodward.

DETAIL: This is a decrease of \$1,632,526 and an increase of 3.52  
FTE positions compared to the estimated net FY 2009 appropriation.  
The change includes:

- A decrease of \$260,907 to reflect the appropriate FMAP rate.
- A decrease of \$1,371,619 for a general reduction of 11.30%.

The FTE positions are not capped in the Bill

43 22 2. The department may continue to bill for state resource

Permits the DHS to continue billing practices that do not include cost

43 23 center services utilizing a scope of services approach used  
43 24 for private providers of ICFMR services, in a manner which  
43 25 does not shift costs between the medical assistance program,  
43 26 counties, or other sources of funding for the state resource  
43 27 centers.

shifting.

43 28 3. The state resource centers may expand the time=limited  
43 29 assessment and respite services during the fiscal year.

Permits the State Resource Centers to expand time-limited  
assessment and respite services.

DETAIL: Time-limited assessments include analysis of patients'  
conditions and development of therapy plans to assist families in  
caring for individuals with mental retardation or developmental  
disabilities. Respite services provide care for special needs  
individuals for a limited duration to provide families with a temporary  
reprieve from caretaking responsibilities.

43 30 4. If the department's administration and the department  
43 31 of management concur with a finding by a state resource  
43 32 center's superintendent that projected revenues can reasonably  
43 33 be expected to pay the salary and support costs for a new  
43 34 employee position, or that such costs for adding a particular  
43 35 number of new positions for the fiscal year would be less than  
44 1 the overtime costs if new positions would not be added, the  
44 2 superintendent may add the new position or positions. If the  
44 3 vacant positions available to a resource center do not include  
44 4 the position classification desired to be filled, the state  
44 5 resource center's superintendent may reclassify any vacant  
44 6 position as necessary to fill the desired position. The  
44 7 superintendents of the state resource centers may, by mutual  
44 8 agreement, pool vacant positions and position classifications  
44 9 during the course of the fiscal year in order to assist one  
44 10 another in filling necessary positions.

Specifies that positions may be added at the two State Resource  
Centers if projected revenues are sufficient to pay the salary and  
support costs of the additional positions.

44 11 5. If existing capacity limitations are reached in  
44 12 operating units, a waiting list is in effect for a service or  
44 13 a special need for which a payment source or other funding is

Permits a State Resource Center to open certain facilities if a service  
waiting list exists and funding is available.

44 14 available for the service or to address the special need, and  
44 15 facilities for the service or to address the special need can  
44 16 be provided within the available payment source or other  
44 17 funding, the superintendent of a state resource center may  
44 18 authorize opening not more than two units or other facilities  
44 19 and begin implementing the service or addressing the special  
44 20 need during fiscal year 2009=2010.

44 21 6. The superintendents of the state resource centers shall  
44 22 report to the persons designated by this division of this Act  
44 23 for submission of reports at least quarterly concerning the  
44 24 use of the authorization in this section for adding new  
44 25 positions, reclassifying positions, pooling vacant positions,  
44 26 opening units or other facilities, and implementing services  
44 27 or addressing special needs.

Requires the Superintendents of the State Resource Centers to report quarterly on FTE positions, new units or expansion, and implementing new services.

44 28 Sec. 24. MI/MR/DD STATE CASES.

General Fund appropriation to the DHS for State Cases.

44 29 1. There is appropriated from the general fund of the  
44 30 state to the department of human services for the fiscal year  
44 31 beginning July 1, 2009, and ending June 30, 2010, the  
44 32 following amount, or so much thereof as is necessary, to be  
44 33 used for the purpose designated:

DETAIL: This is a decrease of \$1,620,890 compared to the estimated net FY 2009 appropriation for a general reduction of 11.30%.

44 34 For distribution to counties for state case services for  
44 35 persons with mental illness, mental retardation, and  
45 1 developmental disabilities in accordance with section 331.440:  
45 2 ..... \$ 11,446,288

45 3 2. For the fiscal year beginning July 1, 2009, and ending  
45 4 June 30, 2010, \$200,000 is allocated for state case services  
45 5 from the amounts appropriated from the fund created in section  
45 6 8.41 to the department of human services from the funds  
45 7 received from the federal government under 42 U.S.C., ch. 6A,  
45 8 subch. XVII, relating to the community mental health center  
45 9 block grant, for the federal fiscal years beginning October 1,  
45 10 2007, and ending September 30, 2008, beginning October 1,

Requires \$200,000 from the Community Mental Health Services Block Grant funds from FFY 2008, FFY 2009, or FFY 2010 to be used for the State Cases costs.

45 11 2008, and ending September 30, 2009, and beginning October 1,  
 45 12 2009, and ending September 30, 2010. The allocation made in  
 45 13 this subsection shall be made prior to any other distribution  
 45 14 allocation of the appropriated federal funds.

45 15 3. For the fiscal year beginning July 1, 2009, to the  
 45 16 extent the appropriation made in this section and other  
 45 17 funding provided for state case services and other support, as  
 45 18 defined in section 331.440, and the other funding available in  
 45 19 the county's services fund under section 331.424A are  
 45 20 insufficient to pay the costs of such services and other  
 45 21 support, a county of residence may implement a waiting list or  
 45 22 other measures to maintain expenditures within the available  
 45 23 funding.

Allows counties to implement a waiting list for the State Cases Program if there are insufficient funds to pay the costs of the services.

45 24 4. Notwithstanding section 8.33, moneys appropriated in  
 45 25 this section that remain unencumbered or unobligated at the  
 45 26 close of the fiscal year shall not revert but shall remain  
 45 27 available for expenditure for the purposes designated until  
 45 28 the close of the succeeding fiscal year.

CODE: Requires nonreversion of funds appropriated for State Cases.

45 29 Sec. 25. MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES ==  
 45 30 COMMUNITY SERVICES FUND. There is appropriated from the  
 45 31 general fund of the state to the mental health and  
 45 32 developmental disabilities community services fund created in  
 45 33 section 225C.7 for the fiscal year beginning July 1, 2009, and  
 45 34 ending June 30, 2010, the following amount, or so much thereof  
 45 35 as is necessary, to be used for the purpose designated:  
 46 1 For mental health and developmental disabilities community  
 46 2 services in accordance with this division of this Act:  
 46 3 ..... \$ 15,790,111

General Fund appropriation for the Mental Health Community Services Fund.

DETAIL: This is a decrease of \$2,227,779 compared to the estimated net FY 2009 appropriation for a general reduction of 11.30%.

46 4 1. Of the funds appropriated in this section, \$15,763,951  
 46 5 shall be allocated to counties for funding of community-based  
 46 6 mental health and developmental disabilities services. The

Allocates \$15,535,967 from the Community Services appropriation to counties based on a formula considering the county's population and federal poverty guidelines.



46 7 moneys shall be allocated to a county as follows:

46 8 a. Fifty percent based upon the county's proportion of the  
46 9 state's population of persons with an annual income which is  
46 10 equal to or less than the poverty guideline established by the  
46 11 federal office of management and budget.

46 12 b. Fifty percent based upon the county's proportion of the  
46 13 state's general population.

46 14 2. a. A county shall utilize the funding the county  
46 15 receives pursuant to subsection 1 for services provided to  
46 16 persons with a disability, as defined in section 225C.2.  
46 17 However, no more than 50 percent of the funding shall be used  
46 18 for services provided to any one of the service populations.

46 19 b. A county shall use at least 50 percent of the funding  
46 20 the county receives under subsection 1 for contemporary  
46 21 services provided to persons with a disability, as described  
46 22 in rules adopted by the department.

46 23 3. Of the funds appropriated in this section, \$26,160  
46 24 shall be used to support the Iowa compass program providing  
46 25 computerized information and referral services for lowans with  
46 26 disabilities and their families.

46 27 4. a. Funding appropriated for purposes of the federal  
46 28 social services block grant is allocated for distribution to  
46 29 counties for local purchase of services for persons with  
46 30 mental illness or mental retardation or other developmental  
46 31 disability.

46 32 b. The funds allocated in this subsection shall be  
46 33 expended by counties in accordance with the county's approved  
46 34 county management plan. A county without an approved county  
46 35 management plan shall not receive allocated funds until the

Requires the funds to be used for services to persons with mental illness, mental retardation, developmental disabilities, and brain injuries. Specifies that no more than 50.00% may be used for any one of these populations. Requires counties to use at least 50.00% of the funding received on contemporary services.

Allocates \$26,160 to support the Iowa Compass Program. The Program provides computerized information and referral services for lowans with developmental disabilities and their families.

DETAIL: This is a decrease of \$3,840 compared to the FY 2009 allocation.

Allocates federal funds appropriated in the Block Grant and Federal Funds Appropriation Bill from the Social Services Block Grant for distribution to counties for local purchase of services for persons with mental illness, mental retardation, and developmental disabilities.

Requires counties to expend Social Services Block Grant funds according to approved county management plans. Prohibits a county from receiving an allocation of Social Services Block Grant funds until the county's plan is approved.

47 1 county's management plan is approved.

47 2 c. The funds provided by this subsection shall be  
 47 3 allocated to each county as follows:  
 47 4 (1) Fifty percent based upon the county's proportion of  
 47 5 the state's population of persons with an annual income which  
 47 6 is equal to or less than the poverty guideline established by  
 47 7 the federal office of management and budget.  
 47 8 (2) Fifty percent based upon the amount provided to the  
 47 9 county for local purchase of services in the preceding fiscal  
 47 10 year.

Requires the funds provided in this Subsection to be allocated to each county according to a specified formula.

DETAIL: The formula remains unchanged from the FY 1997 formula.

47 11 5. A county is eligible for funds under this section if  
 47 12 the county qualifies for a state payment as described in  
 47 13 section 331.439.

Specifies that a county is eligible for State funding through the Community Mental Health Services Fund if it meets the requirements for receiving Property Tax Relief funds and Allowed Growth funds.

47 14 6. The most recent population estimates issued by the  
 47 15 United States bureau of the census shall be applied for the  
 47 16 population factors utilized in this section.

Requires the Department to utilize the most recent population estimates for the distribution of these funds.

47 17 Sec. 26. SEXUALLY VIOLENT PREDATORS.

General Fund appropriation to the DHS for the Sexual Predator Commitment Program.

47 18 1. There is appropriated from the general fund of the  
 47 19 state to the department of human services for the fiscal year  
 47 20 beginning July 1, 2009, and ending June 30, 2010, the  
 47 21 following amount, or so much thereof as is necessary, to be  
 47 22 used for the purpose designated:  
 47 23 For costs associated with the commitment and treatment of  
 47 24 sexually violent predators in the unit located at the state  
 47 25 mental health institute at Cherokee, including costs of legal  
 47 26 services and other associated costs, including salaries,  
 47 27 support, maintenance, and miscellaneous purposes, and for not  
 47 28 more than the following full-time equivalent positions:  
 47 29 ..... \$ 6,860,204  
 47 30 ..... FTEs 105.50

DETAIL: This is net increase of \$158,446 and 11.00 FTE positions. This includes:

- An increase of \$662,000 for an adjustment in per diem and caseload growth.
- A decrease of \$503,554 for a general reduction.

47 31 2. Unless specifically prohibited by law, if the amount  
 47 32 charged provides for recoupment of at least the entire amount  
 47 33 of direct and indirect costs, the department of human services  
 47 34 may contract with other states to provide care and treatment  
 47 35 of persons placed by the other states at the unit for sexually  
 48 1 violent predators at Cherokee. The moneys received under such  
 48 2 a contract shall be considered to be repayment receipts and  
 48 3 used for the purposes of the appropriation made in this  
 48 4 section.

Permits the Unit for Commitment of Sexually Violent Predators to accept out-of-state clients when the entire cost is reimbursed.

48 5 Sec. 27. FIELD OPERATIONS. There is appropriated from the  
 48 6 general fund of the state to the department of human services  
 48 7 for the fiscal year beginning July 1, 2009, and ending June  
 48 8 30, 2010, the following amount, or so much thereof as is  
 48 9 necessary, to be used for the purposes designated:  
 48 10 For field operations, including salaries, support,  
 48 11 maintenance, and miscellaneous purposes, and for not more than  
 48 12 the following full-time equivalent positions:  
 48 13 ..... \$ 63,032,831  
 48 14 ..... FTEs 2,000.13

General Fund appropriation to the DHS for Field Operations staff and support.

DETAIL: This is a net decrease of \$6,201,760 and 130.55 FTE positions compared to the estimated net FY 2009 appropriation. This includes:

- An increase of \$1,500,001 to restore various carryforward funds from FY 2008.
- A decrease of \$7,701,761 to implement an across-the-board reduction of 11.12% for Field Operations.
- A decrease of 130.55 FTEs to reflect anticipated decreases to staff levels.

48 15 Priority in filling full-time equivalent positions shall be  
 48 16 given to those positions related to child protection services  
 48 17 and eligibility determination for low-income families.

Requires priority to be given to child protection services and eligibility determinations when filling FTE positions.

DETAIL: This requirement was in place for FY 2009 for child protection services. The eligibility determination requirement was new for FY 2009.

48 18 Sec. 28. GENERAL ADMINISTRATION. There is appropriated  
 48 19 from the general fund of the state to the department of human  
 48 20 services for the fiscal year beginning July 1, 2009, and  
 48 21 ending June 30, 2010, the following amount, or so much thereof  
 48 22 as is necessary, to be used for the purpose designated:

General Fund appropriation to the DHS for General Administration.

DETAIL: This is a net decrease of \$1,595,837 and 53.17 FTE positions compared to the estimated net FY 2009 appropriation. Changes include:

48 23 For general administration, including salaries, support,  
 48 24 maintenance, and miscellaneous purposes, and for not more than  
 48 25 the following full-time equivalent positions:  
 48 26 ..... \$ 15,252,523  
 48 27 ..... FTEs 354.33

- An increase of \$274,000 for general administration. This allocation was previously funded by the HITT Fund.
- A decrease of \$1,869,837 to implement an across-the-board reduction of 11.09% for General Administration.
- A decrease of 53.17 FTEs to reflect anticipated decreases to staff levels.

48 28 1. Of the funds appropriated in this section, \$48,556 is  
 48 29 allocated for the prevention of disabilities policy council  
 48 30 established in section 225B.3.

Allocates \$48,556 to the Prevention of Disabilities Policy Council.

DETAIL: This is a decrease of \$8,444 compared to the FY 2009 allocation for a general reduction.

48 31 2. The department shall report at least monthly to the  
 48 32 legislative services agency concerning the department's  
 48 33 operational and program expenditures.

Requires the DHS to submit monthly expenditure reports to the LSA.

DETAIL: This was also a requirement for FY 2009.

48 34 3. Notwithstanding provisions to the contrary in chapter  
 48 35 217, if necessary to address funding reductions in general  
 49 1 administration and field operations, the department may  
 49 2 propose and implement reorganization of the departmental  
 49 3 administration and field operations during the fiscal year  
 49 4 beginning July 1, 2009. At least 30 calendar days prior to  
 49 5 implementation of any reorganization, the department shall  
 49 6 submit a detailed proposal for the reorganization to the  
 49 7 chairpersons and ranking members of the joint appropriations  
 49 8 subcommittee on health and human services, the department of  
 49 9 management, and the persons designated by this division of  
 49 10 this Act for submission of reports, to provide an opportunity  
 49 11 for review, and comment, and possible revision of the  
 49 12 proposal.

CODE: Permits the Department of Human Services to implement reorganization of service delivery beginning in FY 2010 only after notifying the Chairs and Ranking Members of the Health and Human Services Appropriations Subcommittee, the Department of Management, and the Legislative Services Agency for review and comment of any proposal to reorganize.

49 13 4. The department shall adopt rules pursuant to chapter  
 49 14 17A establishing standards for childrens centers under section  
 49 15 237B.1, as amended by this Act.

Requires the Department of Human Services to adopt administrative rules to establish standards for children's centers.

49 16 Sec. 29. VOLUNTEERS. There is appropriated from the  
 49 17 general fund of the state to the department of human services  
 49 18 for the fiscal year beginning July 1, 2009, and ending June  
 49 19 30, 2010, the following amount, or so much thereof as is  
 49 20 necessary, to be used for the purpose designated:  
 49 21 For development and coordination of volunteer services:  
 49 22 ..... \$ 94,067

General Fund appropriation to the DHS for the development and coordination of the Volunteer Services Program.

DETAIL: This is a decrease of \$11,650 compared to the estimated net FY 2009 appropriation to implement an across-the-board reduction of 11.01% for Volunteers for FY 2010.

49 23 Sec. 30. FAMILY PLANNING SERVICES. There is appropriated  
 49 24 from the general fund of the state to the department of human  
 49 25 services for the fiscal year beginning July 1, 2009, and  
 49 26 ending June 30, 2010, the following amount or so much thereof  
 49 27 as is necessary, to be used for the purpose designated:  
 49 28 For family planning services to individuals with incomes  
 49 29 not to exceed 200 percent of the federal poverty level as  
 49 30 defined by the most recently revised income guidelines  
 49 31 published by the United States department of health and human  
 49 32 services, who are not currently receiving the specific benefit  
 49 33 under the medical assistance program:  
 49 34 ..... \$ 10,000

General Fund appropriation to the DHS for Family Planning Services.

DETAIL. This is a decrease of \$728,750 compared to the estimated net FY 2009 appropriation.

49 35 Moneys appropriated under this section shall not be used to  
 50 1 provide abortions. The department shall work with appropriate  
 50 2 stakeholders to implement and administer the program.

Prohibits Family Planning funding from being used for abortions. Requires the DHS to work with stakeholders to implement the program.

50 3 Sec. 31. PREGNANCY COUNSELING AND SUPPORT SERVICES PROGRAM  
 50 4 == APPROPRIATION. There is appropriated from the general fund  
 50 5 of the state to the department of human services for the  
 50 6 fiscal year beginning July 1, 2009, and ending June 30, 2010,  
 50 7 the following amount or so much thereof as is necessary for  
 50 8 the purpose designated:  
 50 9 For a pregnancy counseling and support services program as  
 50 10 specified in this section:  
 50 11 ..... \$ 100,000

General Fund appropriation to the DHS for Pregnancy Counseling and Support Services.

DETAIL. This is a decrease of \$97,000 compared to the estimated net FY 2009 appropriation.

50 12 The department of human services shall continue the  
 50 13 pregnancy counseling and support services program to provide  
 50 14 core services consisting of information, education,  
 50 15 counseling, and support services to women who experience  
 50 16 unplanned pregnancies by supporting childbirth, assisting  
 50 17 pregnant women in remaining healthy and maintaining a healthy  
 50 18 pregnancy while deciding whether to keep the child or place  
 50 19 the child for adoption, and assisting women after the birth of  
 50 20 a child that was implemented pursuant to 2008 Iowa Acts,  
 50 21 chapter 1187, section 30.

Requires the DHS to establish a Pregnancy Counseling and Support Services Program to provide services, information, education, counseling, and support to women that experience unplanned pregnancies.

50 22 Sec. 32. MEDICAL ASSISTANCE, STATE SUPPLEMENTARY  
 50 23 ASSISTANCE, AND SOCIAL SERVICE PROVIDERS REIMBURSED UNDER  
 THE

Caps nursing facility reimbursements at \$146,803,575 and requires the DHS to adjust the inflation factor in the case-mix reimbursement rate if expenditures exceed the cap.

50 24 DEPARTMENT OF HUMAN SERVICES.

50 25 1. a. (1) For the fiscal year beginning July 1, 2009,  
 50 26 the total state funding amount for the nursing facility budget  
 50 27 shall not exceed \$146,803,575.

DETAIL: This is a decrease of \$36,563,748 compared to the FY 2009 cap. The decrease reflects a 6.20% FMAP increase in the federal American Recovery and Reinvestment Act of 2009. There is no change in the overall rate for nursing facilities compared to FY 2009. The federal government is now paying for a greater percentage of the costs.

50 28 (2) For the fiscal year beginning July 1, 2009, the  
 50 29 department shall rebase case=mix nursing facility rates.  
 50 30 However, total nursing facility budget expenditures, including  
 50 31 both case=mix and noncase=mix shall not exceed the amount  
 50 32 specified in subparagraph (1). When calculating case=mix per  
 50 33 diem cost and the patient=day=weighted medians used in  
 50 34 rate=setting for nursing facilities effective July 1, 2009,  
 50 35 the inflation factor applied from the midpoint of the cost  
 51 1 report period to the first day of the state fiscal year rate  
 51 2 period shall be adjusted to maintain state funding within the  
 51 3 amount specified in subparagraph (1).

51 4 (3) The department, in cooperation with nursing facility  
 51 5 representatives, shall review projections for state funding  
 51 6 expenditures for reimbursement of nursing facilities on a  
 51 7 quarterly basis and the department shall determine if an  
 51 8 adjustment to the medical assistance reimbursement rate is  
 51 9 necessary in order to provide reimbursement within the state  
 51 10 funding amount. Any temporary enhanced federal financial  
 51 11 participation that may become available to the Iowa medical

51 12 assistance program during the fiscal year shall not be used in  
51 13 projecting the nursing facility budget. Notwithstanding 2001  
51 14 Iowa Acts, chapter 192, section 4, subsection 2, paragraph  
51 15 "c", and subsection 3, paragraph "a", subparagraph (2), if the  
51 16 state funding expenditures for the nursing facility budget for  
51 17 the fiscal year beginning July 1, 2009, are projected to  
51 18 exceed the amount specified in subparagraph (1), the  
51 19 department shall adjust the reimbursement for nursing  
51 20 facilities reimbursed under the case=mix reimbursement system  
51 21 to maintain expenditures of the nursing facility budget within  
51 22 the specified amount. The department shall revise such  
51 23 reimbursement as necessary to adjust the annual accountability  
51 24 measures payment in accordance with 2001 Iowa Acts, chapter  
51 25 192, section 4, subsection 4, as amended by 2008 Iowa Acts,  
51 26 chapter 1187, section 33, and as amended by this Act.

51 27 b. For the fiscal year beginning July 1, 2009, the  
51 28 department shall reimburse pharmacy dispensing fees using a  
51 29 single rate of \$4.57 per prescription or the pharmacy's usual  
51 30 and customary fee, whichever is lower.

Requires a reimbursement rate of \$4.57 for pharmacist services using a single dispensing fee per prescription or the usual and customary fee, whichever is lower.

DETAIL: Maintains the FY 2009 reimbursement rate.

51 31 c. (1) For the fiscal year beginning July 1, 2009,  
51 32 reimbursement rates for outpatient hospital services shall  
51 33 remain at the rates in effect on June 30, 2009.

Requires the rate of reimbursement for outpatient services to remain the same as the FY 2009 reimbursement rate.

51 34 (2) For the fiscal year beginning July 1, 2009,  
51 35 reimbursement rates for inpatient hospital services in effect  
52 1 on June 30, 2009, shall be reduced by 2.3 percent.

Reduces the rate for inpatient hospital services by 2.30% compared to the FY 2009 rate.

DETAIL: This change is due to not annualizing the FY 2009 hospital rebase in FY 2010. Hospitals will still maintain the \$5,500,000 they received from FY 2009, but will not receive the \$1,833,333 to annualize for the first quarter of FY 2010.

52 2 (3) For the fiscal year beginning July 1, 2009, the

Requires the rate of reimbursement for graduate medical education and disproportionate share hospital fund to remain the same as the

52 3 graduate medical education and disproportionate share hospital  
52 4 fund shall remain at the amount in effect on June 30, 2009.

FY 2009 reimbursement rate.

52 5 (4) In order to ensure the efficient use of limited state  
52 6 funds in procuring health care services for low-income lowans,  
52 7 funds appropriated in this Act for hospital services shall not  
52 8 be used for activities which would be excluded from a  
52 9 determination of reasonable costs under the federal Medicare  
52 10 program pursuant to 42 U.S.C. 1395X(v)(1)(N).

Requires funds appropriated for hospital activities to be used for activities pursuant to the federal Medicare program.

52 11 d. For the fiscal year beginning July 1, 2009,  
52 12 reimbursement rates for rural health clinics, hospices,  
52 13 independent laboratories, rehabilitation agencies, and acute  
52 14 mental hospitals shall be increased in accordance with  
52 15 increases under the federal Medicare program or as supported  
52 16 by their Medicare audited costs.

Requires rural health clinics, hospice services, and acute mental hospitals to be reimbursed at the rate established under the federal Medicare Program for FY 2010.

52 17 e. For the fiscal year beginning July 1, 2009,  
52 18 reimbursement rates for home health agencies shall remain at  
52 19 the rates in effect on June 30, 2009, not to exceed a home  
52 20 health agency's actual allowable cost.

Requires rates to home health agencies to remain at the rate in effect June 30, 2009.

52 21 f. For the fiscal year beginning July 1, 2009, federally  
52 22 qualified health centers shall receive cost-based  
52 23 reimbursement for 100 percent of the reasonable costs for the  
52 24 provision of services to recipients of medical assistance.

Requires the DHS to reimburse federally qualified health centers 100.00% of reasonable costs for the provision of services to Medical Assistance Program recipients.

52 25 g. For the fiscal year beginning July 1, 2009, the  
52 26 reimbursement rates for dental services shall remain at the  
52 27 rates in effect on June 30, 2009.

Requires the FY 2010 reimbursement rates for dental services to remain at the rate in effect June 30, 2009.

52 28 h. Unless legislation is enacted by the Eighty-third  
52 29 General Assembly, 2009 Session, adjusting such rates, for the

Caps the FY 2010 reimbursement rate for psychiatric medical institutions for children (PMICs) at \$167.19 per day.



52 30 fiscal year beginning July 1, 2009, the maximum reimbursement  
52 31 rate for psychiatric medical institutions for children shall  
52 32 be \$167.19 per day.

DETAIL: Maintains the FY 2009 reimbursement rate.

52 33 i. For the fiscal year beginning July 1, 2009, unless  
52 34 otherwise specified in this Act, all noninstitutional medical  
52 35 assistance provider reimbursement rates shall remain at the  
53 1 rates in effect on June 30, 2009, except for area education  
53 2 agencies, local education agencies, infant and toddler  
53 3 services providers, and those providers whose rates are  
53 4 required to be determined pursuant to section 249A.20.

Requires the FY 2010 reimbursement rates for all non-institutional Medical Assistance providers, with specified exceptions, to remain at FY 2009 rates.

53 5 j. Notwithstanding any provision to the contrary, for the  
53 6 fiscal year beginning July 1, 2009, the reimbursement rate for  
53 7 anesthesiologists shall remain at the rate in effect on June  
53 8 30, 2009.

CODE: Requires the FY 2010 reimbursement rates for Anesthesiologists to remain at the rate in effect June 30, 2009.

53 9 k. Notwithstanding section 249A.20, for the fiscal year  
53 10 beginning July 1, 2009, the average reimbursement rate for  
53 11 health care providers eligible for use of the federal Medicare  
53 12 resource-based relative value scale reimbursement methodology  
53 13 under that section shall remain at the rate in effect on June  
53 14 30, 2009; however, this rate shall not exceed the maximum  
53 15 level authorized by the federal government.

CODE: Requires the FY 2010 rates for health providers eligible for the average rate reimbursement to remain at the rate in effect June 30, 2009.

53 16 l. For the fiscal year beginning July 1, 2009, the  
53 17 reimbursement rate for residential care facilities shall not  
53 18 be less than the minimum payment level as established by the  
53 19 federal government to meet the federally mandated maintenance  
53 20 of effort requirement. The flat reimbursement rate for  
53 21 facilities electing not to file semiannual cost reports shall  
53 22 not be less than the minimum payment level as established by  
53 23 the federal government to meet the federally mandated  
53 24 maintenance of effort requirement.

Requires the reimbursement rates for residential care facilities to be no less than the minimum payment level required to meet the federal maintenance of effort requirement.

53 25 m. For the fiscal year beginning July 1, 2009, inpatient  
53 26 mental health services provided at hospitals shall be  
53 27 reimbursed at the cost of the services, subject to Medicaid  
53 28 program upper payment limit rules; community mental health  
53 29 centers and providers of mental health services to county  
53 30 residents pursuant to a waiver approved under section 225C.7,  
53 31 subsection 3, shall be reimbursed at 100 percent of the  
53 32 reasonable costs for the provision of services to recipients  
53 33 of medical assistance; and psychiatrists shall be reimbursed  
53 34 at the medical assistance program fee for service rate.

Requires the FY 2010 reimbursement rate for inpatient mental health services at hospitals to be set at 100.00% of costs.

53 35 n. For the fiscal year beginning July 1, 2009, the  
54 1 reimbursement rate for consumer-directed attendant care shall  
54 2 remain at the rates in effect on June 30, 2009.

Requires the FY 2010 reimbursement rates for Consumer Directed Attendant Care to remain at the rate in effect June 30, 2009.

54 3 o. For the fiscal year beginning July 1, 2009, the  
54 4 reimbursement rate for providers of family planning services  
54 5 that are eligible to receive a 90 percent federal match shall  
54 6 be increased by 5 percent above the rates in effect on June  
54 7 30, 2009.

Requires the FY 2010 reimbursement rates for Family Planning Services be increased by 5.00% over the rates in effect June 30, 2009.

54 8 2. For the fiscal year beginning July 1, 2009, the  
54 9 reimbursement rate for providers reimbursed under the in=  
54 10 home-related care program shall not be less than the minimum  
54 11 payment level as established by the federal government to meet  
54 12 the federally mandated maintenance of effort requirement.

Establishes the maximum FY 2010 reimbursement rate for in-home health-related care providers at the minimum payment level established by the federal government.

54 13 3. Unless otherwise directed in this section, when the  
54 14 department's reimbursement methodology for any provider  
54 15 reimbursed in accordance with this section includes an  
54 16 inflation factor, this factor shall not exceed the amount by  
54 17 which the consumer price index for all urban consumers  
54 18 increased during the calendar year ending December 31, 2002.

Specifies that when the required reimbursement methodology for providers under this Section includes an inflation factor, the factor cannot exceed the increase in the Consumer Price Index (CPI) for Urban Consumers for the calendar year ending December 31, 2002.

54 19 4. For the fiscal year beginning July 1, 2009,

CODE: Provides the daily family foster care rates and the maximum

54 20 notwithstanding section 234.38, the foster family basic daily  
54 21 maintenance rate, the maximum adoption subsidy rate, and the  
54 22 maximum supervised apartment living foster care rate, and the  
54 23 preparation for adult living program maintenance rate for  
54 24 children ages 0 through 5 years shall be \$16.36, the rate for  
54 25 children ages 6 through 11 years shall be \$17.01, the rate for  
54 26 children ages 12 through 15 years shall be \$18.62, and the  
54 27 rate for children and young adults ages 16 and older shall be  
54 28 \$18.87.

adoption subsidy rates for children by age range for FY 2010.

DETAIL: The FY 2010 rates are the same as the FY 2009 rates.  
Permits the reimbursement to be less than the statutory requirement  
of 65.00% of the United States Department of Agriculture cost to raise  
a child. The provision is for FY 2010 only.

54 29 5. For the fiscal year beginning July 1, 2009, the maximum  
54 30 reimbursement rates for social services providers reimbursed  
54 31 under a purchase of social services contract shall remain at  
54 32 the rates in effect on June 30, 2009, or the provider's actual  
54 33 and allowable cost plus inflation for each service, whichever  
54 34 is less. However, the rates may be adjusted under any of the  
54 35 following circumstances:

Requires the maximum reimbursement rates for social service  
providers, including the Resource Family Recruitment and Retention  
Contractor, to be the same rate as provided in FY 2009, and provides  
for circumstances when the rates may be adjusted.

55 1 a. If a new service was added after June 30, 2009, the  
55 2 initial reimbursement rate for the service shall be based upon  
55 3 actual and allowable costs.  
55 4 b. If a social service provider loses a source of income  
55 5 used to determine the reimbursement rate for the provider, the  
55 6 provider's reimbursement rate may be adjusted to reflect the  
55 7 loss of income, provided that the lost income was used to  
55 8 support actual and allowable costs of a service purchased  
55 9 under a purchase of service contract.

55 10 6. For the fiscal year beginning July 1, 2009, the  
55 11 reimbursement rates for family-centered service providers,  
55 12 family foster care service providers, group foster care  
55 13 service providers, and the resource family recruitment and  
55 14 retention contractor shall remain at the rates in effect on  
55 15 June 30, 2009.

Maintains foster care reimbursement rates for specified providers in  
FY 2010 at the same level as FY 2009.

55 16 7. The group foster care reimbursement rates paid for  
55 17 placement of children out of state shall be calculated

Requires the group foster care reimbursement rates paid for  
placement of children out-of-state to be calculated according to the

55 18 according to the same rate-setting principles as those used  
55 19 for in-state providers, unless the director of human services  
55 20 or the director's designee determines that appropriate care  
55 21 cannot be provided within the state. The payment of the daily  
55 22 rate shall be based on the number of days in the calendar  
55 23 month in which service is provided.

same rate-setting principles as those used for in-state providers, unless the Director of the DHS determines that appropriate care cannot be provided in the State. Also, requires payment of the daily rate to be based on the number of days in the calendar month that service is provided.

55 24 8. For the fiscal year beginning July 1, 2009, remedial  
55 25 service providers shall receive the same level of  
55 26 reimbursement under the same methodology in effect on June 30,  
55 27 2009.

Requires the FY 2010 child welfare remedial service providers to be reimbursed under the FY 2009 methodology.

55 28 9. a. For the fiscal year beginning July 1, 2009, the  
55 29 combined service and maintenance components of the  
55 30 reimbursement rate paid for shelter care services and  
55 31 alternative child welfare emergency services purchased under a  
55 32 contract shall be based on the financial and statistical  
55 33 report submitted to the department. The maximum reimbursement  
55 34 rate shall be \$92.36 per day. The department shall reimburse  
55 35 a shelter care provider at the provider's actual and allowable  
56 1 unit cost, plus inflation, not to exceed the maximum  
56 2 reimbursement rate.

Requires the FY 2010 combined service and maintenance components of the reimbursement rate paid to shelter care providers to be based on the cost report submitted to the DHS. Also, requires a maximum reimbursement rate of \$92.36 per day, and requires the DHS to reimburse shelter care providers at the actual and allowable unit cost, plus inflation, not to exceed the maximum reimbursement rate.

DETAIL: This maintains the rate received in FY 2009.

56 3 b. Notwithstanding section 232.141, subsection 8, for the  
56 4 fiscal year beginning July 1, 2009, the amount of the  
56 5 statewide average of the actual and allowable rates for  
56 6 reimbursement of juvenile shelter care homes that is utilized  
56 7 for the limitation on recovery of unpaid costs shall remain at  
56 8 the amount in effect for this purpose in the preceding fiscal  
56 9 year.

CODE: Maintains the limit of the Statewide average reimbursement rates paid to shelter care providers that was received in FY 2009. This impacts the amount of charges that are reimbursed.

56 10 10. For the fiscal year beginning July 1, 2009, the  
56 11 department shall calculate reimbursement rates for  
56 12 intermediate care facilities for persons with mental  
56 13 retardation at the 80th percentile. For the fiscal year

Requires the DHS to calculate reimbursement rates for intermediate care facilities for persons with mental retardation (ICF/MRs) at the 80th percentile for FY 2010 and calculates the inflation factor for ICF/MR's at 3.00% for FY 2010.

56 14 beginning July 1, 2009, notwithstanding any provision to the  
56 15 contrary, the rate calculation methodology shall utilize a 3  
56 16 percent consumer price index inflation factor. However,  
56 17 beginning July 1, 2010, the rate calculation methodology shall  
56 18 utilize the consumer price index inflation factor applicable  
56 19 to the fiscal year beginning July 1, 2010.

DETAIL: The consumer price index that is normally used to calculate the inflation factor is less than the amount budgeted for FY 2010. The legislation changes the inflation factor to the budgeted number. This change is for FY 2010 only.

56 20 11. For the fiscal year beginning July 1, 2009, for child  
56 21 care providers reimbursed under the state child care  
56 22 assistance program, the department shall set provider  
56 23 reimbursement rates based on the rate reimbursement survey  
56 24 completed in December 2004. Effective July 1, 2009, the child  
56 25 care provider reimbursement rates shall remain at the rates in  
56 26 effect on June 30, 2009. The department shall set rates in a  
56 27 manner so as to provide incentives for a nonregistered  
56 28 provider to become registered by applying the increase only to  
56 29 registered and licensed providers.

Requires the DHS to set FY 2010 provider reimbursement rates for child care providers based on the rate reimbursement survey completed in December 2004. Requires rates to be set in a manner that will provide incentives for non-registered providers to become registered.

56 30 12. For the fiscal year beginning July 1, 2009,  
56 31 reimbursements for providers reimbursed by the department of  
56 32 human services may be modified if appropriated funding is  
56 33 allocated for that purpose from the senior living trust fund  
56 34 created in section 249H.4.

Specifies that FY 2010 reimbursements for providers reimbursed by the DHS may be modified if appropriated funding is allocated for that purpose from the Senior Living Trust Fund.

56 35 13. The department may adopt emergency rules to implement  
57 1 this section.

Permits the DHS to adopt emergency rules to implement these reimbursements.

57 2 Sec. 33. 2001 Iowa Acts, chapter 192, section 4,  
57 3 subsection 4, as amended by 2008 Iowa Acts, chapter 1187,  
57 4 section 33, is amended by striking the subsection, and  
57 5 inserting in lieu thereof the following:  
57 6 4. NURSING FACILITY PAY=FOR=PERFORMANCE.  
57 7 a. It is the intent of the general assembly that the  
57 8 department of human services initiate a system to recognize  
57 9 nursing facilities that provide quality of life and

CODE: Implements new nursing facility pay-for-performance measures that reward facilities for quality of care, quality of life, and efficiency standards.

DETAIL: A total of \$2,276,000 is currently allocated for this program under the Medicaid appropriation.

57 10 appropriate access to medical assistance program beneficiaries  
57 11 in a cost-effective manner.

57 12 b. The department shall design and implement a program to  
57 13 establish benchmarks and to collect data for these benchmarks  
57 14 to evaluate nursing facility performance and to adjust the  
57 15 program and benchmarks, accordingly, to recognize improvement.  
57 16 The program shall include procedures to provide a  
57 17 pay-for-performance payment based upon a nursing facility's  
57 18 achievement of multiple favorable outcomes as determined by  
57 19 these benchmarks. Any increased reimbursement shall not  
57 20 exceed 5 percent of the sum of the direct and nondirect care  
57 21 medians. The increased reimbursement shall be included in the  
57 22 calculation of nursing facility modified price-based payment  
57 23 rates with the exception of Medicare-certified hospital-based  
57 24 nursing facilities, state-operated nursing facilities, and  
57 25 special population nursing facilities. The increased  
57 26 reimbursement shall be applicable to the payment periods  
57 27 beginning July 1, 2009.

57 28 c. It is the intent of the general assembly that any  
57 29 pay-for-performance payments to nursing facilities be used to  
57 30 support direct care staff through increased wages, enhanced  
57 31 benefits, and expanded training opportunities and that all  
57 32 pay-for-performance payments be used in a manner that improves  
57 33 and enhances quality of care for residents.

57 34 d. The program shall include various levels of compliance  
57 35 in order for a nursing facility to be considered eligible for

58 1 a pay-for-performance payment including:

58 2 (1) The initial meeting of prerequisites including all of  
58 3 the following:

58 4 (a) A nursing facility shall not be eligible to  
58 5 participate if during the payment period the nursing facility  
58 6 receives a deficiency resulting in actual harm or immediate  
58 7 jeopardy, pursuant to the federal certification guidelines at  
58 8 an H level scope and severity or higher, regardless of the  
58 9 amount of fines assessed.

58 10 (b) The pay-for-performance payment component shall be  
58 11 suspended for any month the nursing facility is in denial of  
58 12 payment for new admissions status.

58 13 (2) Monitoring for nursing facility compliance with  
58 14 program requirements including:  
58 15 (a) Survey compliance during the payment period. If a  
58 16 nursing facility receives a deficiency resulting in actual  
58 17 harm pursuant to the federal certification guidelines at a G  
58 18 level scope and severity or higher, the payment shall be  
58 19 reduced by 25 percent for each such deficiency received during  
58 20 the state fiscal year. Additionally, if the nursing facility  
58 21 fails to cure any deficiency cited within the time required by  
58 22 the department of inspections and appeals, the payment shall  
58 23 be forfeited and the nursing facility shall not receive any  
58 24 payment for that payment period.  
58 25 (b) Compliance with the use of the pay=for=performance  
58 26 payment received.  
58 27 (c) Establishing and utilizing a tracking and reporting  
58 28 system to document the use of the pay=for=performance payments  
58 29 by the nursing facility.  
58 30 (3) Use of measures based on the four domains of quality  
58 31 of life, quality of care, access, and efficiency.  
58 32 e. (1) The department shall utilize cost reports or other  
58 33 means to document nursing facility eligibility for and  
58 34 compliance with the pay=for=performance payments.  
58 35 (2) The department shall publish the results of the  
59 1 measures for which a nursing facility qualifies and the amount  
59 2 of any pay=for=performance payment received. The department  
59 3 shall also publish information regarding the use of the  
59 4 pay=for=performance payments by any nursing facility receiving  
59 5 such payment.  
59 6 f. The department may adopt emergency rules to implement  
59 7 this subsection.  
59 8 g. The department shall request any medical assistance  
59 9 state plan amendment necessary to implement the  
59 10 pay=for=performance payment methodology.

59 11 h. It is the intent of the general assembly that the  
59 12 department of human services continue to convene the workgroup  
59 13 established pursuant to 2008 Iowa Acts, chapter 1187, section

Require the DHS to continue to convene the long term care stakeholders workgroup to develop recommendations on quality of care improvement and implementation.

59 14 33, to develop recommendations to design a quality improvement  
59 15 process for targeted nursing facilities for implementation in  
59 16 the fiscal year beginning July 1, 2010. Recommendations shall  
59 17 include a process that identifies the best practices used in  
59 18 facilities receiving pay-for-performance payment and creates a  
59 19 system to assist other nursing facilities in the  
59 20 implementation of those best practices.

59 21 Sec. 34. EMERGENCY RULES.

59 22 1. If specifically authorized by a provision of this  
59 23 division of this Act, the department of human services or the  
59 24 mental health, mental retardation, developmental disabilities,  
59 25 and brain injury commission may adopt administrative rules  
59 26 under section 17A.4, subsection 2, and section 17A.5,  
59 27 subsection 2, paragraph "b", to implement the provisions and  
59 28 the rules shall become effective immediately upon filing or on  
59 29 a later effective date specified in the rules, unless the  
59 30 effective date is delayed by the administrative rules review  
59 31 committee. Any rules adopted in accordance with this section  
59 32 shall not take effect before the rules are reviewed by the  
59 33 administrative rules review committee. The delay authority  
59 34 provided to the administrative rules review committee under  
59 35 section 17A.4, subsection 5, and section 17A.8, subsection 9,  
60 1 shall be applicable to a delay imposed under this section,  
60 2 notwithstanding a provision in those sections making them  
60 3 inapplicable to section 17A.5, subsection 2, paragraph "b".  
60 4 Any rules adopted in accordance with the provisions of this  
60 5 section shall also be published as notice of intended action  
60 6 as provided in section 17A.4.

Permits the Department of Human Services and the Mental Health,  
Mental Retardation, Developmental Disabilities, and Brain Injury  
Commission to adopt emergency rules when authorized.

60 7 2. If during the fiscal year beginning July 1, 2009, the  
60 8 department of human services is adopting rules in accordance  
60 9 with this section or as otherwise directed or authorized by  
60 10 state law, and the rules will result in an expenditure  
60 11 increase beyond the amount anticipated in the budget process  
60 12 or if the expenditure was not addressed in the budget process

Requires the Department of Human Services to report to the  
Chairpersons and Ranking Members of the Appropriation  
Committees, the Legislative Services Agency, and the Department of  
Management at least 30 days prior to submitting rules that will have a  
fiscal impact that was not addressed in the budget process.



60 13 for the fiscal year, the department shall notify the persons  
60 14 designated by this division of this Act for submission of  
60 15 reports, the chairpersons and ranking members of the  
60 16 committees on appropriations, and the department of management  
60 17 concerning the rules and the expenditure increase. The  
60 18 notification shall be provided at least 30 calendar days prior  
60 19 to the date notice of the rules is submitted to the  
60 20 administrative rules coordinator and the administrative code  
60 21 editor.

60 22 Sec. 35. DEPARTMENTAL EFFICIENCIES == BUDGET REDUCTIONS.  
60 23 The departments of elder affairs, public health, human  
60 24 services, and veterans affairs shall develop a plan to  
60 25 maximize efficiencies to reduce their respective FY 2009=2010  
60 26 budgets by five percent beginning in FY 2010=2011. The  
60 27 departments shall collaborate to the extent appropriate to  
60 28 accomplish such reductions. The departments shall report  
60 29 their plans for maximizing efficiencies and reducing their  
60 30 budgets to the individuals specified in this Act to receive  
60 31 reports by December 15, 2009.

Requires the Department of Elder Affairs, the Department of Public Health, Department of Human Services, and Veterans Affairs to develop a plan to maximize efficiencies and reduce their budget by 5.00% beginning in FY 2011. Requires a report to the Health and Human Services Appropriations Subcommittee, caucus staffs, and Legislative Services Agency by December 15, 2009.

60 32 Sec. 36. FULL=TIME EQUIVALENT POSITIONS == REDUCTIONS.  
60 33 The director of the department or state agency to which  
60 34 appropriations are made pursuant to this division of this Act,  
60 35 in making any reductions in full=time equivalent positions,  
61 1 shall, to the greatest extent possible, retain those positions  
61 2 providing direct services to the public.

Requires the Directors receiving funds under this Act to retain positions providing direct services to the public, to the extent possible.

61 3 Sec. 37. EXPENSE REIMBURSEMENT == REQUIREMENTS.  
61 4 Notwithstanding any provision to the contrary, for the fiscal  
61 5 year beginning July 1, 2009, and ending June 30, 2010, the  
61 6 director of a department or state agency to which  
61 7 appropriations are made pursuant to the provisions of this Act  
61 8 shall require employees, in order to receive reimbursement for  
61 9 expense, to submit actual receipts for meals and other costs.

CODE: Requires State employees to submit receipts to receive reimbursement for meal costs.

DETAIL: The provision applies to departments and agencies receiving appropriations in this Bill.

61 10 Reimbursement up to the maximum amount shall only be allowed  
61 11 in an amount equal to the sum of the actual receipts  
61 12 submitted.

61 13 Sec. 38. OUT=OF=STATE TRAVEL == RESTRICTIONS.  
61 14 Notwithstanding any provision to the contrary, for the fiscal  
61 15 year beginning July 1, 2009, and ending June 30, 2010,  
61 16 out=of=state travel by an employee of a department or state  
61 17 agency to which appropriations are made pursuant to this Act  
61 18 shall not be authorized unless the executive council  
61 19 authorizes the travel as necessary for the performance of  
61 20 official state business.

CODE: Requires all out-of-state travel to be authorized by the Executive Council.

DETAIL: The provision applies to departments and agencies receiving appropriations in this Bill.

61 21 Sec. 39. LEAN GOVERNMENT EXCHANGE. Beginning July 1,  
61 22 2009, the department of human services shall participate in  
61 23 the lean government exchange through consultation with the  
61 24 department of management, office of lean enterprise, to  
61 25 improve the speed and efficiency of departmental and program  
61 26 processes by eliminating waste. The department shall  
61 27 initially apply this methodology to general administration.  
61 28 The department shall submit periodic progress reports  
61 29 regarding such implementation to the persons designated by  
61 30 this division of this Act for submission of reports.

Requires the Department of Human Services to participate in the lean government exchange in consultation with the Department of Management.

61 31 Sec. 40. REPORTS. Any reports or information required to  
61 32 be compiled and submitted under this Act shall be submitted to  
61 33 the chairpersons and ranking members of the joint  
61 34 appropriations subcommittee on health and human services, the  
61 35 legislative services agency, and the legislative caucus staffs  
62 1 on or before the dates specified for submission of the reports  
62 2 or information.

Specifies that any reports required by this Bill be submitted to the Chairpersons and Ranking Members of the Health and Human Services Appropriations Subcommittee, Legislative Caucus Staff, and the Legislative Services Agency.

62 3 Sec. 41. EFFECTIVE DATE. The following provisions of this  
62 4 division of this Act, being deemed of immediate importance,  
62 5 take effect upon enactment:

The provision requiring representatives of the DHS and juvenile court services to collaborate regarding group foster care expenditures is effective on enactment.

62 6 The provision under the appropriation for child and family  
 62 7 services, relating to requirements of section 232.143 for  
 62 8 representatives of the department of human services and  
 62 9 juvenile court services to establish a plan for continuing  
 62 10 group foster care expenditures for fiscal year 2009=2010.

62 11 DIVISION II  
 62 12 SENIOR LIVING TRUST FUND,  
 62 13 PHARMACEUTICAL SETTLEMENT ACCOUNT,  
 62 14 IOWACARE ACCOUNT, AND HEALTH CARE  
 62 15 TRANSFORMATION ACCOUNT

62 16 Sec. 42. DEPARTMENT OF ELDER AFFAIRS. There is  
 62 17 appropriated from the senior living trust fund created in  
 62 18 section 249H.4 to the department of elder affairs for the  
 62 19 fiscal year beginning July 1, 2009, and ending June 30, 2010,  
 62 20 the following amount, or so much thereof as is necessary, to  
 62 21 be used for the purpose designated:  
 62 22 For the development and implementation of a comprehensive  
 62 23 senior living program, including case management only if the  
 62 24 monthly cost per client for case management for the frail  
 62 25 elderly services provided does not exceed the amount specified  
 62 26 in this section, and including program administration and  
 62 27 costs associated with implementation:  
 62 28 ..... \$ 8,486,698

Senior Living Trust Fund appropriation to the Department of Elder Affairs.

DETAIL: Maintains the current level of funding.

62 29 1. a. Of the funds appropriated in this section,  
 62 30 \$1,010,000 shall be transferred to the department of human  
 62 31 services in equal amounts on a quarterly basis for  
 62 32 reimbursement of case management services provided under the  
 62 33 medical assistance elderly waiver.

Requires \$1,010,000 to be transferred to the DHS, in equal amounts on a quarterly basis, for reimbursement under the Medicaid Elderly Waiver.

DETAIL: Maintains the current allocation and transfer levels.

62 34 b. The monthly cost per client for case management for the  
 62 35 frail elderly services provided shall not exceed an average of  
 63 1 \$70. However, if the department of human services adopts

Sets the maximum cost per client at \$70.00 per member, per month. If the Department of Human Services adopts rules to revise the reimbursement methodology for case management, the \$70.00 cap is

63 2 administrative rules revising the reimbursement methodology to  
63 3 include 15 minute units, 24-hour on-call, and other  
63 4 requirements consistent with federal regulations, the \$70  
63 5 monthly cap shall be eliminated and replaced with a quarterly  
63 6 projection of expenditures and reimbursement revisions  
63 7 necessary to maintain expenditures within the amounts budgeted  
63 8 under the appropriations made for the fiscal year for the  
63 9 medical assistance program.

eliminated.

63 10 c. The department of human services shall review  
63 11 projections for state funding expenditures for reimbursement  
63 12 of case management services under the medical assistance  
63 13 elderly waiver on a quarterly basis and shall determine if an  
63 14 adjustment to the medical assistance reimbursement rates are  
63 15 necessary to provide reimbursement within the state funding  
63 16 amounts budgeted under the appropriations made for the fiscal  
63 17 year for the medical assistance program. Any temporary  
63 18 enhanced federal financial participation that may become  
63 19 available for the medical assistance program during the fiscal  
63 20 year shall not be used in projecting the medical assistance  
63 21 elderly waiver case management budget. The department of  
63 22 human services shall revise such reimbursement rates as  
63 23 necessary to maintain expenditures for medical assistance  
63 24 elderly waiver case management services within the state  
63 25 funding amounts budgeted under the appropriations made for the  
63 26 fiscal year for the medical assistance program.

Requires the Department of Human Services to review expenditures for reimbursement of case management services under the Medicaid Elderly Waiver on a quarterly basis and adjust to provide reimbursements within the appropriation.

63 27 2. Notwithstanding section 249H.7, the department of elder  
63 28 affairs shall distribute funds appropriated in this section in  
63 29 a manner that will supplement and maximize federal funds under  
63 30 the federal Older Americans Act and shall not use the amount  
63 31 distributed for any administrative purposes of either the  
63 32 department of elder affairs or the area agencies on aging.

CODE: Requires the Department of Elder Affairs to maximize federal funds under the federal Older Americans Act, and prohibits these funds from being used for administration.

63 33 3. Of the funds appropriated in this section, \$60,000

Allocates \$60,000 for dementia-specific education for direct care workers.

63 34 shall be used to provide dementia=specific education to direct  
 63 35 care workers and other providers of long=term care to enhance  
 64 1 existing or scheduled efforts through the Iowa caregivers  
 64 2 association, the Alzheimer's association, and other  
 64 3 organizations identified as appropriate by the department.

DETAIL: Maintains the current allocation level.

64 4 Sec. 43. DEPARTMENT OF INSPECTIONS AND APPEALS. There is  
 64 5 appropriated from the senior living trust fund created in  
 64 6 section 249H.4 to the department of inspections and appeals  
 64 7 for the fiscal year beginning July 1, 2009, and ending June  
 64 8 30, 2010, the following amount, or so much thereof as is  
 64 9 necessary, to be used for the purpose designated:  
 64 10 For the inspection and certification of assisted living  
 64 11 facilities and adult day care services, including program  
 64 12 administration and costs associated with implementation:  
 64 13 ..... \$ 1,339,527

Senior Living Trust Fund appropriation to the Department of  
 Inspections and Appeals for inspection and certification of assisted  
 living facilities and adult day care services.

DETAIL: Maintains the current level of Senior Living Trust Fund  
 support.

64 14 Sec. 44. IOWA FINANCE AUTHORITY. There is appropriated  
 64 15 from the senior living trust fund created in section 249H.4 to  
 64 16 the Iowa finance authority for the fiscal year beginning July  
 64 17 1, 2009, and ending June 30, 2010, the following amount, or so  
 64 18 much thereof as is necessary, to be used for the purposes  
 64 19 designated:  
 64 20 For the rent subsidy program, to provide reimbursement for  
 64 21 rent expenses to eligible persons:  
 64 22 ..... \$ 700,000

Senior Living Trust Fund appropriation to the Iowa Finance Authority  
 (IFA) for the Rent Subsidy Program.

DETAIL: Maintains the current level of Senior Living Trust Fund  
 support.

64 23 Participation in the rent subsidy program shall be limited  
 64 24 to only those persons who meet the requirements for the  
 64 25 nursing facility level of care for home and community=based  
 64 26 services waiver services as in effect on July 1, 2009, and to  
 64 27 those individuals who are eligible for the federal money  
 64 28 follows the person grant program under the medical assistance  
 64 29 program. Of the funds appropriated in this section, not more  
 64 30 than \$35,000 may be used for administrative costs.

Requires participation in the Rent Subsidy Program to be limited to  
 individuals at risk of nursing home placement and those eligible under  
 the federal Money Follows the Person Grant Program. Permits the  
 IFA to use up to \$35,000 for administrative costs.

64 31 Sec. 45. DEPARTMENT OF HUMAN SERVICES. Any funds  
 64 32 remaining in the senior living trust fund created in section  
 64 33 249H.4 following the appropriations from the senior living  
 64 34 trust fund made in this division of this Act to the department  
 64 35 of elder affairs, the department of inspections and appeals,  
 65 1 and the Iowa finance authority, for the fiscal year beginning  
 65 2 July 1, 2009, and ending June 30, 2010, are appropriated to  
 65 3 the department of human services to supplement the medical  
 65 4 assistance program appropriations made in this Act, including  
 65 5 program administration and costs associated with  
 65 6 implementation. In order to carry out the purposes of this  
 65 7 section, the department may transfer funds appropriated in  
 65 8 this section to supplement other appropriations made to the  
 65 9 department of human services.

Appropriates the balance of the Senior Living Trust Fund to the Medicaid Program for FY 2010 after all other appropriations from the Fund are made.

DETAIL: It is estimated that there will be \$16,784,483 available for appropriation. This is a decrease of \$94,968,712 compared to the estimated net FY 2009 appropriation.

65 10 Sec. 46. PHARMACEUTICAL SETTLEMENT ACCOUNT. There is  
 65 11 appropriated from the pharmaceutical settlement account  
 65 12 created in section 249A.33 to the department of human services  
 65 13 for the fiscal year beginning July 1, 2009, and ending June  
 65 14 30, 2010, the following amount, or so much thereof as is  
 65 15 necessary, to be used for the purpose designated:  
 65 16 To supplement the appropriations made for medical contracts  
 65 17 under the medical assistance program:  
 65 18 ..... \$ 1,323,833

Pharmaceutical Settlement Account appropriation to the Department of Human Services for medical contracts in Medicaid.

DETAIL: Maintains the current level of Pharmaceutical Settlement Account support.

65 19 Sec. 47. APPROPRIATIONS FROM IOWACARE ACCOUNT.

65 20 1. There is appropriated from the IowaCare account created  
 65 21 in section 249J.24 to the state board of regents for  
 65 22 distribution to the university of Iowa hospitals and clinics  
 65 23 for the fiscal year beginning July 1, 2009, and ending June  
 65 24 30, 2010, the following amount, or so much thereof as is  
 65 25 necessary, to be used for the purposes designated:  
 65 26 For salaries, support, maintenance, equipment, and  
 65 27 miscellaneous purposes, for the provision of medical and

IowaCare Account appropriation to the University of Iowa Hospitals and Clinics (UIHC).

DETAIL: Maintains the current level of IowaCare Account support. IowaCare is an indigent care program for uninsured adults with incomes up to 200.00% of the Federal Poverty Level. It was created during the 2005 Legislative Session in response to the elimination of federal Intergovernmental Transfers (IGTs). Fiscal year 2006 was the first year this appropriation was funded. A portion of the funds are to

65 28 surgical treatment of indigent patients, for provision of  
65 29 services to members of the expansion population pursuant to  
65 30 chapter 249J, and for medical education:  
65 31 ..... \$ 27,284,584

be used for graduate medical education.

65 32 a. Funds appropriated in this subsection shall not be used  
65 33 to perform abortions except medically necessary abortions, and  
65 34 shall not be used to operate the early termination of  
65 35 pregnancy clinic except for the performance of medically  
66 1 necessary abortions. For the purpose of this subsection, an  
66 2 abortion is the purposeful interruption of pregnancy with the  
66 3 intention other than to produce a live-born infant or to  
66 4 remove a dead fetus, and a medically necessary abortion is one  
66 5 performed under one of the following conditions:

Specifies the conditions that permit the Medical Assistance Program to reimburse providers for abortion services.

66 6 (1) The attending physician certifies that continuing the  
66 7 pregnancy would endanger the life of the pregnant woman.

66 8 (2) The attending physician certifies that the fetus is  
66 9 physically deformed, mentally deficient, or afflicted with a  
66 10 congenital illness.

66 11 (3) The pregnancy is the result of a rape which is  
66 12 reported within 45 days of the incident to a law enforcement  
66 13 agency or public or private health agency which may include a  
66 14 family physician.

66 15 (4) The pregnancy is the result of incest which is  
66 16 reported within 150 days of the incident to a law enforcement  
66 17 agency or public or private health agency which may include a  
66 18 family physician.

66 19 (5) The abortion is a spontaneous abortion, commonly known  
66 20 as a miscarriage, wherein not all of the products of  
66 21 conception are expelled.

DETAIL: The rules regarding abortion that apply to the Medical Assistance Program also apply to IowaCare.

66 22 b. Notwithstanding any provision of law to the contrary,  
66 23 the amount appropriated in this subsection shall be allocated  
66 24 in twelve equal monthly payments as provided in section  
66 25 249J.24.

CODE: Requires the amount appropriated in this Subsection to be allocated in 12 equal monthly payments.

66 26 2. There is appropriated from the IowaCare account created  
 66 27 in section 249J.24 to the state board of regents for  
 66 28 distribution to the university of Iowa hospitals and clinics  
 66 29 for the fiscal year beginning July 1, 2009, and ending June  
 66 30 30, 2010, the following amount, or so much thereof as is  
 66 31 necessary, to be used for the purposes designated:  
 66 32 For salaries, support, maintenance, equipment, and  
 66 33 miscellaneous purposes, for the provision of medical and  
 66 34 surgical treatment of indigent patients, for provision of  
 66 35 services to members of the expansion population pursuant to  
 67 1 chapter 249J, and for medical education:  
 67 2 ..... \$ 47,020,131

IowaCare Account appropriation of an additional \$47,020,131 to the State Board of Regents to be distributed to the University of Iowa Hospitals and Clinics (UIHC).

DETAIL: This is an increase of \$11,050,766 compared to estimated net FY 2009. The increase is for increased enrollment and utilization of the IowaCare Program.

67 3 The amount appropriated in this subsection shall be  
 67 4 distributed only if expansion population claims adjudicated  
 67 5 and paid by the Iowa Medicaid enterprise exceed the  
 67 6 appropriation to the state board of regents for distribution  
 67 7 to the university of Iowa hospitals and clinics provided in  
 67 8 subsection 1. The amount appropriated in this subsection  
 67 9 shall be distributed monthly for expansion population claims  
 67 10 adjudicated and approved for payment by the Iowa Medicaid  
 67 11 enterprise using medical assistance program reimbursement  
 67 12 rates.

Permits the appropriation to be distributed only if expansion population claims exceed the \$27,284,584 appropriated to the Board of Regents and requires the funds to be distributed monthly.

67 13 3. There is appropriated from the IowaCare account created  
 67 14 in section 249J.24 to the department of human services for the  
 67 15 fiscal year beginning July 1, 2009, and ending June 30, 2010,  
 67 16 the following amount, or so much thereof as is necessary, to  
 67 17 be used for the purposes designated:  
 67 18 For distribution to a publicly owned acute care teaching  
 67 19 hospital located in a county with a population over 350,000  
 67 20 for the provision of medical and surgical treatment of  
 67 21 indigent patients, for provision of services to members of the  
 67 22 expansion population pursuant to chapter 249J, and for medical  
 67 23 education:  
 67 24 ..... \$ 46,000,000

IowaCare Account appropriation to Polk County Broadlawns Medical Center.

DETAIL: This is an increase of \$6,000,000 compared to the estimated net FY 2009 appropriation. Broadlawns transfers \$38,000,000 of Polk County property tax proceeds to the State to draw down the federal match that funds the IowaCare Program.



67 25 a. Notwithstanding any provision of law to the contrary,  
67 26 the amount appropriated in this subsection shall be allocated  
67 27 in twelve equal monthly payments as provided in section  
67 28 249J.24. Any amount appropriated in this subsection in excess  
67 29 of \$41,000,000 shall be allocated only if federal funds are  
67 30 available to match the amount allocated.

67 31 b. Notwithstanding the total amount of proceeds  
67 32 distributed pursuant to section 249J.24, subsection 6,  
67 33 paragraph "a", unnumbered paragraph 1, for the fiscal year  
67 34 beginning July 1, 2009, and ending June 30, 2010, the county  
67 35 treasurer of a county with a population of over 350,000 in  
68 1 which a publicly owned acute care teaching hospital is located  
68 2 shall distribute the proceeds collected pursuant to section  
68 3 347.7 in a total amount of \$38,000,000, which would otherwise  
68 4 be distributed to the county hospital, to the treasurer of  
68 5 state for deposit in the IowaCare account.

68 6 c. (1) Notwithstanding the amount collected and  
68 7 distributed for deposit in the IowaCare account pursuant to  
68 8 section 249J.24, subsection 6, paragraph "a", subparagraph  
68 9 (1), the first \$19,000,000 in proceeds collected pursuant to  
68 10 section 347.7 between July 1, 2009, and December 31, 2009,  
68 11 shall be distributed to the treasurer of state for deposit in  
68 12 the IowaCare account and collections during this time period  
68 13 in excess of \$19,000,000 shall be distributed to the acute  
68 14 care teaching hospital identified in this subsection.

68 15 (2) Notwithstanding the amount collected and distributed  
68 16 for deposit in the IowaCare account pursuant to section  
68 17 249J.24, subsection 6, paragraph "a", subparagraph (2), the  
68 18 first \$19,000,000 in collections pursuant to section 347.7  
68 19 between January 1, 2010, and June 30, 2010, shall be  
68 20 distributed to the treasurer of state for deposit in the  
68 21 IowaCare account and collections during this time period in  
68 22 excess of \$19,000,000 shall be distributed to the acute care  
68 23 teaching hospital identified in this subsection.

68 24 Sec. 48. APPROPRIATIONS FROM ACCOUNT FOR HEALTH CARE  
68 25 TRANSFORMATION == DEPARTMENT OF HUMAN SERVICES.

Appropriations from the Health Care Transformation Account (HCTA).

68 26 Notwithstanding any provision to the contrary, there is  
 68 27 appropriated from the account for health care transformation  
 68 28 created in section 249J.23 to the department of human services  
 68 29 for the fiscal year beginning July 1, 2009, and ending June  
 68 30 30, 2010, the following amounts, or so much thereof as is  
 68 31 necessary, to be used for the purposes designated:

DETAIL: The HCTA was created as part of the agreement with the federal Centers for Medicare and Medicaid Services (CMS) to discontinue Iowa's Intergovernmental Transfers (IGTs) during the 2005 Legislative Session. It is intended to fund the reforms specified in HF 841 (IowaCare and Medicaid Reform Act) passed during the 2005 Legislative Session.

68 32 1. For the costs of medical examinations and development  
 68 33 of personal health improvement plans for the expansion  
 68 34 population pursuant to section 249J.6:  
 68 35 ..... \$ 556,800

Appropriation from the HCTA for medical examinations and personal improvement plans for IowaCare enrollees.

DETAIL: Maintains the current level of HCTA support.

69 1 2. For the provision of a medical information hotline for  
 69 2 the expansion population as provided in section 249J.6:  
 69 3 ..... \$ 100,000

Appropriation from the HCTA for a medical information hotline for IowaCare enrollees.

DETAIL: This is a decrease of \$50,000 compared to the estimated net FY 2009 appropriation.

69 4 3. For other health promotion partnership activities  
 69 5 pursuant to section 249J.14:  
 69 6 ..... \$ 600,000

Appropriation from the HCTA for other health partnership activities related to IowaCare.

DETAIL: This is a decrease of \$300,000 compared to the estimated FY 2009 appropriation.

69 7 4. For the costs related to audits, performance  
 69 8 evaluations, and studies required pursuant to chapter 249J:  
 69 9 ..... \$ 125,000

Appropriation from the HCTA for costs related to audits, performance evaluations, and studies related to IowaCare.

DETAIL: This is a decrease of \$275,000 compared to the estimated FY 2009 appropriation.

69 10 5. For administrative costs associated with chapter 249J:  
 69 11 ..... \$ 1,132,412

Appropriation from the HCTA for IowaCare administrative costs.

DETAIL: Maintains the current level of HCTA support.

69 12 6. For planning and development, in cooperation with the

Appropriation from the HCTA to the DHS and the DPH to start a

69 13 department of public health, of a phased-in program to provide  
 69 14 a dental home for children in accordance with section 249J.14,  
 69 15 subsection 7:  
 69 16 ..... \$ 1,000,000

program to provide a dental home for children.

DETAIL: Maintains the current level of HCTA support.

69 17 7. For continuation of the establishment of the tuition  
 69 18 assistance for individuals serving individuals with  
 69 19 disabilities pilot program, as enacted in 2008 Iowa Acts,  
 69 20 chapter 1187, section 130:  
 69 21 ..... \$ 50,000

Appropriation from the HCTA for tuition assistance for individuals serving individuals with disabilities pilot program.

DETAIL: This is a decrease of \$450,000 compared to the estimated net FY 2009 appropriation.

69 22 7A. For medical contracts:  
 69 23 ..... \$ 1,300,000

Appropriation from the HCTA for Medical Contracts.

DETAIL: This is a one-time appropriation to make upgrades to the Iowa Medicaid Enterprise's computer systems required by the federal government.

69 24 8. For payment to the publicly owned acute care teaching  
 69 25 hospital located in a county with a population of over 350,000  
 69 26 that is a participating provider pursuant to chapter 249J:  
 69 27 ..... \$ 290,000

Appropriation from the HCTA for the Polk County Broadlawns Medical Center for the IowaCare Program. Requires distribution of the funds on a monthly basis.

DETAIL: This is an increase of \$60,000 compared to the estimated net FY 2009 appropriation.

69 28 Disbursements under this subsection shall be made monthly.  
 69 29 The hospital shall submit a report following the close of the  
 69 30 fiscal year regarding use of the funds appropriated in this  
 69 31 subsection to the persons specified in this Act to receive  
 69 32 reports.

Requires the DHS to make 12 monthly payments to Polk County Broadlawns Medical Center for the appropriation. Requires an FY 2010 report from the Medical Center.

69 33 Notwithstanding section 8.39, subsection 1, without the  
 69 34 prior written consent and approval of the governor and the  
 69 35 director of the department of management, the director of  
 70 1 human services may transfer funds among the appropriations

CODE: Permits the DHS to transfer funds to carry out activities in this Section without the approval of the Governor or the Director of the Department of Management, but requires the DHS to report any transfers to the Legislative Services Agency.

70 2 made in this section as necessary to carry out the purposes of  
 70 3 the account for health care transformation. The department  
 70 4 shall report any transfers made pursuant to this section to  
 70 5 the legislative services agency.

70 6 Sec. 49. APPROPRIATION FROM ACCOUNT FOR HEALTH CARE  
 70 7 TRANSFORMATION == DEPARTMENT OF ELDER AFFAIRS.  
 70 8 Notwithstanding any provision to the contrary, there is  
 70 9 appropriated from the account for health care transformation  
 70 10 created in section 249J.23 to the department of elder affairs  
 70 11 for the fiscal year beginning July 1, 2009, and ending June  
 70 12 30, 2010, the following amounts, or so much thereof as is  
 70 13 necessary, to be used for the purpose designated:  
 70 14 For re=programming of the SEAMLESS computer system for case  
 70 15 management:  
 70 16 ..... \$ 200,000

Appropriation from the HCTA to the Department of Elder Affairs.

DETAIL: This is a one-time appropriation to make upgrades to the case management computer system to conform to new federal requirements.

70 17 Sec. 50. IOWACARE RENEWAL OF WAIVER. It is the intent of  
 70 18 the general assembly that the department of human services  
 70 19 apply for renewal of the IowaCare section 1115 demonstration  
 70 20 waiver under the medical assistance program. The department  
 70 21 shall seek to renew the existing terms of the waiver for an  
 70 22 additional five=year period and shall seek maximum expenditure  
 70 23 authority for payments to the state's four mental health  
 70 24 institutes. The IowaCare section 1115 demonstration waiver  
 70 25 renewal shall be amended to remove the limitation on new  
 70 26 provider taxes and shall transfer the seriously emotionally  
 70 27 disturbed children waiver to be approved as a section 1915(c)  
 70 28 home and community=based services waiver.

Specifies that it is the intent of the General Assembly that the Department apply for a renewal of the IowaCare Waiver for an additional five years. Requires the Department to negotiate the removal of the limitation on new provider taxes and transfer the Seriously Emotionally Disturbed Children Waiver to a 1915(c) Home and Community-Based Services Waiver.

70 29 Sec. 51. MEDICAL ASSISTANCE PROGRAM == NONREVERSION FOR FY  
 70 30 2009=2010. Notwithstanding section 8.33, if moneys  
 70 31 appropriated for purposes of the medical assistance program  
 70 32 for the fiscal year beginning July 1, 2009, and ending June  
 70 33 30, 2010, from the general fund of the state, the senior

CODE: Requires nonreversion of funds from the Medicaid Program to the Senior Living Trust Fund. Instead the funds would remain within the appropriation to be used in the succeeding fiscal year.

DETAIL: The federal American Recovery and Reinvestment Act of 2009 has a provision prohibiting the transfer of Medicaid stimulus

70 34 living trust fund, the health care trust fund, and the  
 70 35 property tax relief fund are in excess of actual expenditures  
 71 1 for the medical assistance program and remain unencumbered or  
 71 2 unobligated at the close of the fiscal year, the excess moneys  
 71 3 shall not revert but shall remain available for expenditure  
 71 4 for the purposes of the medical assistance program until the  
 71 5 close of the succeeding fiscal year.

dollars to a reserve or rainy day fund. This language complies with those regulations.

71 6 DIVISION III  
 71 7 MH/MR/DD SERVICES  
 71 8 ALLOWED GROWTH FUNDING  
 71 9 FY 2009=2010

71 10 Sec. 52. 2008 Iowa Acts, chapter 1191, section 1, is  
 71 11 amended to read as follows:  
 71 12 SECTION 1. COUNTY MENTAL HEALTH, MENTAL RETARDATION, AND  
 71 13 DEVELOPMENTAL DISABILITIES ALLOWED GROWTH APPROPRIATION AND  
 71 14 ALLOCATIONS == FISCAL YEAR 2009=2010.

CODE: Updates the FY 2010 original Mental Health Allowed Growth appropriation to reflect a general reduction of 12.80% and the elimination of the 3.00% Allowed Growth appropriation passed in HF 2700 (FY 2009 Standing Appropriations Act).

71 15 4-. There is appropriated from the general fund of the  
 71 16 state to the department of human services for the fiscal year  
 71 17 beginning July 1, 2009, and ending June 30, 2010, the  
 71 18 following amount, or so much thereof as is necessary, to be  
 71 19 used for the purpose designated:  
 71 20 For distribution to counties of the county mental health,  
 71 21 mental retardation, and developmental disabilities allowed  
 71 22 growth factor adjustment for fiscal year 2009=2010 as provided  
 71 23 in this section in lieu of the allowed growth factor  
 71 24 provisions of section 331.438, subsection 2, and section  
 71 25 331.439, subsection 3, and chapter 426B :  
 71 26 ..... \$ ~~69,949,069~~  
 71 27 54,108,770  
 71 28 2-. The amount appropriated in this section shall be  
 71 29 allocated as provided in a later enactment of the general  
 71 30 assembly.

DETAIL: This includes a net decrease of \$15,851,299 as follows:

- A decrease of \$8,275,660 to eliminate the Allowed Growth increase.
- A decrease of \$7,722,389 for a general reduction of 12.80%.
- An increase of \$146,750 to move the Purchase of Service Provider contract to the General Fund from the HITT Fund that has been eliminated.

71 31 Sec. 53. 2008 Iowa Acts, chapter 1191, section 1, as

CODE: Allocates 146,750 for the continuation of the local purchase of

71 32 amended by this division of this Act, is amended by adding the  
71 33 following new subsections:  
71 34 NEW SUBSECTION . 1. Of the amount appropriated in this  
71 35 section, \$146,750 shall be used for assistance to the counties  
72 1 with limited county mental health, mental retardation, and  
72 2 developmental disabilities services fund balances which were  
72 3 selected in accordance with 2000 Iowa Acts, chapter 1221,  
72 4 section 3, to receive such assistance, in the same amount  
72 5 provided during the fiscal year beginning July 1, 2000, and  
72 6 ending June 30, 2001, to pay reimbursement increases in  
72 7 accordance with 2000 Iowa Acts, chapter 1221, section 3.

service provider salary increase for FY 2010.

DETAIL: Maintains the current level of support. This allocation was previously funded by the Health Iowa Tobacco Trust Act of 2009.

72 8 NEW SUBSECTION . 2. Of the amount appropriated in this  
72 9 section, \$12,000,000 shall be distributed as provided in this  
72 10 subsection.  
72 11 a. To be eligible to receive a distribution under this  
72 12 subsection, a county must meet the following requirements:  
72 13 (1) The county is levying for the maximum amount allowed  
72 14 for the county's mental health, mental retardation, and  
72 15 developmental disabilities services fund under section  
72 16 331.424A for taxes due and payable in the fiscal year  
72 17 beginning July 1, 2009, or the county is levying for at least  
72 18 90 percent of the maximum amount allowed for the county's  
72 19 services fund and that levy rate is more than \$2 per \$1,000 of  
72 20 the assessed value of all taxable property in the county.  
72 21 (2) In the fiscal year beginning July 1, 2007, the  
72 22 county's mental health, mental retardation, and developmental  
72 23 disabilities services fund ending balance under generally  
72 24 accepted accounting principles was equal to or less than 15  
72 25 percent of the county's actual gross expenditures for that  
72 26 fiscal year.  
72 27 b. A county's allocation of the amount appropriated in  
72 28 this subsection shall be determined based upon the county's  
72 29 proportion of the general population of the counties eligible  
72 30 to receive an allocation under this subsection. The most  
72 31 recent population estimates issued by the United States bureau  
72 32 of the census shall be applied in determining population for

CODE: Requires counties eligible for the \$12,000,000 Mental Health Allowed Growth funding to comply with the following:

- Levy at least 90.00% of the maximum levy.
- Levy at least \$2.00 per \$1,000 of the taxable assessed property value.
- Maintain a Mental Health Services Fund balance for FY 2008 of 15.00% or less.

72 33 the purposes of this paragraph.  
 72 34 c. The allocations made pursuant to this subsection are  
 72 35 subject to the distribution provisions and withholding  
 73 1 requirements established in this section for the county mental  
 73 2 health, mental retardation, and developmental disabilities  
 73 3 allowed growth factor adjustment for the fiscal year beginning  
 73 4 July 1, 2009.

73 5 NEW SUBSECTION . 3. The following amount of the funding  
 73 6 appropriated in this section is the allowed growth factor  
 73 7 adjustment for fiscal year 2009=2010, and shall be credited to  
 73 8 the allowed growth funding pool created in the property tax  
 73 9 relief fund and for distribution in accordance with section  
 73 10 426B.5, subsection 1:  
 73 11 ..... \$ 41,962,020

CODE: Sets the expenditure target allocation for the allowed growth funding pool for FY 2010.

73 12 NEW SUBSECTION . 4. The following formula amounts shall be  
 73 13 utilized only to calculate preliminary distribution amounts  
 73 14 for the allowed growth factor adjustment for fiscal year  
 73 15 2009=2010 under this section by applying the indicated formula  
 73 16 provisions to the formula amounts and producing a preliminary  
 73 17 distribution total for each county:  
 73 18 a. For calculation of a distribution amount for eligible  
 73 19 counties from the allowed growth funding pool created in the  
 73 20 property tax relief fund in accordance with the requirements  
 73 21 in section 426B.5, subsection 1:  
 73 22 ..... \$ 49,626,596  
 73 23 b. For calculation of a distribution amount for counties  
 73 24 from the mental health and developmental disabilities (MH/DD)  
 73 25 community services fund in accordance with the formula  
 73 26 provided in the appropriation made for the MH/DD community  
 73 27 services fund for the fiscal year beginning July 1, 2009:  
 73 28 ..... \$ 15,763,951  
 73 29 NEW SUBSECTION . 5. After applying the applicable  
 73 30 statutory distribution formulas to the amounts indicated in  
 73 31 subsection 4 for purposes of producing preliminary

CODE: Provides the annual distribution of the FY 2010 Mental Health Allowed Growth appropriation. Reflects appropriations from multiple sources with a single distribution. Requires \$54,108,770 to be distributed to counties that levy at least 70.00% for the MH/MR/DD Services Fund and have limited Fund balances. Fund balances for the distribution formula are those from FY 2008. Those counties that have an ending Fund balance of between 10.00% and 25.00% will experience a reduction of \$7,664,576 as a withholding target.

73 32 distribution totals, the department of human services shall  
73 33 apply a withholding factor to adjust an eligible individual  
73 34 county's preliminary distribution total. In order to be  
73 35 eligible for a distribution under this section, a county must  
74 1 be levying 90 percent or more of the maximum amount allowed  
74 2 for the county's mental health, mental retardation, and  
74 3 developmental disabilities services fund under section  
74 4 331.424A for taxes due and payable in the fiscal year for  
74 5 which the distribution is payable. An ending balance  
74 6 percentage for each county shall be determined by expressing  
74 7 the county's ending balance on a modified accrual basis under  
74 8 generally accepted accounting principles for the fiscal year  
74 9 beginning July 1, 2007, in the county's mental health, mental  
74 10 retardation, and developmental disabilities services fund  
74 11 created under section 331.424A, as a percentage of the  
74 12 county's gross expenditures from that fund for that fiscal  
74 13 year. If a county borrowed moneys for purposes of providing  
74 14 services from the county's services fund on or before July 1,  
74 15 2007, and the county's services fund ending balance for that  
74 16 fiscal year includes the loan proceeds or an amount designated  
74 17 in the county budget to service the loan for the borrowed  
74 18 moneys, those amounts shall not be considered to be part of  
74 19 the county's ending balance for purposes of calculating an  
74 20 ending balance percentage under this subsection. The  
74 21 withholding factor for a county shall be the following  
74 22 applicable percent:  
74 23     a. For an ending balance percentage of less than 5  
74 24 percent, a withholding factor of 0 percent. In addition, a  
74 25 county that is subject to this lettered paragraph shall  
74 26 receive an inflation adjustment equal to 3 percent of the  
74 27 gross expenditures reported for the county's services fund for  
74 28 the fiscal year.  
74 29     b. For an ending balance percentage of 5 percent or more  
74 30 but less than 10 percent, a withholding factor of 0 percent.  
74 31 In addition, a county that is subject to this lettered  
74 32 paragraph shall receive an inflation adjustment equal to 2  
74 33 percent of the gross expenditures reported for the county's  
74 34 services fund for the fiscal year.



74 35 c. For an ending balance percentage of 10 percent or more  
75 1 but less than 25 percent, a withholding factor of 25 percent.  
75 2 However, for counties with an ending balance percentage of 10  
75 3 percent or more but less than 15 percent, the amount withheld  
75 4 shall be limited to the amount by which the county's ending  
75 5 balance was in excess of the ending balance percentage of 10  
75 6 percent.  
75 7 d. For an ending balance percentage of 25 percent or more,  
75 8 a withholding percentage of 100 percent.  
75 9 NEW SUBSECTION . 6. The total withholding amounts applied  
75 10 pursuant to subsection 5 shall be equal to a withholding  
75 11 target amount of \$7,664,576. If the department of human  
75 12 services determines that the amount to be withheld in  
75 13 accordance with subsection 6 is not equal to the target  
75 14 withholding amount, the department shall adjust the  
75 15 withholding factors listed in subsection 6 as necessary to  
75 16 achieve the target withholding amount. However, in making  
75 17 such adjustments to the withholding factors, the department  
75 18 shall strive to minimize changes to the withholding factors  
75 19 for those ending balance percentage ranges that are lower than  
75 20 others and shall not adjust the zero withholding factor or the  
75 21 inflation adjustment percentage specified in subsection 5,  
75 22 paragraph "a".

75 23 Sec. 54. ADULT MENTAL HEALTH AND DEVELOPMENTAL  
75 24 DISABILITIES SERVICES SYSTEM TASK FORCE. The co-chairpersons  
75 25 of the joint appropriations subcommittee on health and human  
75 26 services, in consultation with the ranking members of the  
75 27 subcommittee, shall appoint a task force of stakeholders for  
75 28 the 2009 legislative interim to address the service system  
75 29 administered by counties for adult mental health and  
75 30 developmental disabilities services. The task force shall  
75 31 address both funding and service issues and may utilize a  
75 32 facilitator to assist the process. The task force shall  
75 33 submit a final report with recommendations to the governor and  
75 34 general assembly for action during the 2010 legislative  
75 35 session.

Requires the Chairpersons, in consultation with the Ranking Members, of the Health and Human Services Appropriations Subcommittee to appoint a task force of stakeholders during the 2009 interim to address the Mental Health Service System.

76 1 Sec. 55. MENTAL HEALTH, MENTAL RETARDATION, DEVELOPMENTAL  
 76 2 DISABILITIES, AND BRAIN INJURY COMMISSION AND MENTAL HEALTH  
 76 3 PLANNING COUNCIL. During the fiscal year beginning July 1,  
 76 4 2009, the mental health, mental retardation, developmental  
 76 5 disabilities, and brain injury commission and the Iowa mental  
 76 6 health planning council established by the department of human  
 76 7 services pursuant to federal requirements for the community  
 76 8 mental health services block grant, or the officers of such  
 76 9 bodies, shall meet at least quarterly to coordinate the  
 76 10 efforts of the bodies. The bodies shall report to the persons  
 76 11 designated by this division of this Act for submission of  
 76 12 reports on or before January 15, 2010, concerning the  
 76 13 coordination efforts.

Requires the Mental Health, Mental Retardation, Developmental Disabilities, and Brain Injury Council to meet with the Iowa Mental Health Planning Council quarterly to coordinate efforts.

76 14 DIVISION IV  
 76 15 HEALTH CARE TRUST FUND APPROPRIATIONS ==  
 76 16 HEALTH CARE ACTIVITIES

76 17 Sec. 56. DEPARTMENT OF PUBLIC HEALTH. In addition to any  
 76 18 other appropriation made in this Act for the purposes  
 76 19 designated, there is appropriated from the health care trust  
 76 20 fund created in section 453A.35A to the department of public  
 76 21 health for the fiscal year beginning July 1, 2009, and ending  
 76 22 June 30, 2010, the following amounts, or so much thereof as is  
 76 23 necessary, for the purposes designated:

76 24 1. ADDICTIVE DISORDERS  
 76 25 ..... \$ 2,748,692

Health Care Trust Fund appropriation to the Addictive Disorders Program.

DETAIL: This is a decrease of \$446,472 compared to the estimated net FY 2009 appropriation and a decrease of 5.00 FTE positions. The changes in the allocations are delineated below.

76 26 a. Of the funds appropriated in this subsection, \$357,870  
 76 27 shall be used for culturally competent substance abuse

Allocates \$357,870 for implementation of three culturally competent substance abuse treatment pilot projects and specifies project

76 28 treatment pilot projects.	requirements.
76 29 (1) The department shall utilize the amount allocated in	
76 30 this lettered paragraph for at least three pilot projects to	DETAIL: This is a decrease of \$55,986 compared to the estimated
76 31 provide culturally competent substance abuse treatment in	net FY 2009 allocation.
76 32 various areas of the state. Each pilot project shall target a	
76 33 particular ethnic minority population. The populations	
76 34 targeted shall include but are not limited to	
76 35 African=American, Asian, and Latino.	
77 1 (2) The pilot project requirements shall provide for	
77 2 documentation or other means to ensure access to the cultural	
77 3 competence approach used by a pilot project so that such	
77 4 approach can be replicated and improved upon in successor	
77 5 programs.	
77 6 b. Of the funds appropriated in this subsection,	Allocates \$1,597,656 for tobacco use prevention, cessation, and
77 7 \$1,597,656 shall be used for tobacco use prevention,	treatment, and specifies the activities to be funded. Permits
77 8 cessation, and treatment. The department shall utilize the	administrative expenditures of \$148,262.
77 9 funds to provide for a variety of activities related to	
77 10 tobacco use prevention, cessation, and treatment including to	DETAIL: This is a decrease of \$249,946 compared to the FY 2009
77 11 support Quitline Iowa, QuitNet cessation counseling and	allocation. There is \$8,028,214 appropriated from the General Fund
77 12 education, grants to school districts and community	for the same purposes. There is a carryforward of \$1,000,000 from
77 13 organizations to support Just Eliminate Lies youth chapters	FY 2009 to FY 2010 expected for the same purpose.
77 14 and youth tobacco prevention activities, the Just Eliminate	
77 15 Lies tobacco prevention media campaign, nicotine replacement	
77 16 therapy, and other prevention and cessation materials and	
77 17 media promotion. Of the funds allocated in this lettered	
77 18 paragraph, not more than \$148,262 may be utilized by the	
77 19 department for administrative purposes.	
77 20 c. Of the funds appropriated in this subsection, \$793,166	Allocates \$793,166 for substance abuse treatment.
77 21 shall be used for substance abuse treatment activities.	
	DETAIL: This is a decrease of \$124,087 compared to the FY 2009
	allocation. There is \$16,852,765 allocated to substance abuse
	treatment in the Addictive Disorders General Fund appropriation.
77 22 2. HEALTHY CHILDREN AND FAMILIES	Health Care Trust Fund appropriation to the Healthy Children and

77 23 ..... \$ 493,574

Families Programs.

DETAIL: This is a decrease of \$174,126 and 1.00 FTE position compared to the estimated net FY 2009 appropriation. An additional \$2,249,167 is provided to the Healthy Children and Families Programs from the General Fund in Division I. The changes in the allocations are delineated below

77 24 a. Of the funds appropriated in this subsection, \$159,603  
77 25 shall be used to address the healthy mental development of  
77 26 children from birth through five years of age through local  
77 27 evidence-based strategies that engage both the public and  
77 28 private sectors in promoting healthy development, prevention,  
77 29 and treatment for children.

Allocates \$159,603 for the Assuring Better Child Health and Development Program (ABCD II).

DETAIL: This is a decrease of \$39,367 compared to the FY 2009 allocation. An additional \$292,791 is allocated from the General Fund for this purpose in Division I.

77 30 b. Of the funds appropriated in this subsection, \$143,643  
77 31 shall be used for childhood obesity prevention.

Allocates \$143,643 for childhood obesity prevention.

DETAIL: This is a decrease of \$35,430 compared to the FY 2009 allocation.

77 32 c. Of the funds appropriated in this subsection, \$190,328  
77 33 shall be used to provide audiological services and hearing  
77 34 aids for children. The department may enter into a contract  
77 35 to administer this paragraph.

Allocates \$190,328 for audiological services and hearing aids for children.

DETAIL: This is a decrease of \$46,944 compared to the FY 2009 allocation.

78 1 d. It is the intent of the general assembly that the  
78 2 department of public health shall implement the  
78 3 recommendations of the postnatal tissue and fluid bank task  
78 4 force created in 2007 Iowa Acts, chapter 147, based upon the  
78 5 report submitted to the general assembly in November 2007, as  
78 6 funding becomes available. The department shall notify the  
78 7 Iowa Code editor and the persons specified in this Act to  
78 8 receive reports when such funding becomes available.

Specifies legislative intent that the DPH continue to implement the recommendations of the Postnatal Tissue and Fluid Bank Task Force.

## 78 9 3. CHRONIC CONDITIONS

78 10 ..... \$ 891,219

Health Care Trust Fund appropriation to the Chronic Conditions Program.

DETAIL: This is a decrease of \$272,962 and 1.00 FTE position compared to the estimated net FY 2009 appropriation. An additional \$2,756,236 is provided to the Chronic Conditions Program from the General Fund in Division I. The changes in the allocations are delineated below.

78 11 a. Of the funds appropriated in this subsection, \$383,271  
78 12 shall be used for child health specialty clinics.

Allocates \$383,271 for additional funding for child health specialty clinics.

DETAIL: This is a decrease of \$88,269 compared to the FY 2009 allocation. This is in addition to the current \$461,832 in General Fund appropriations provided for this purpose.

78 13 b. Of the funds appropriated in this subsection, \$346,224  
78 14 shall be used for the comprehensive cancer control program to  
78 15 reduce the burden of cancer in Iowa through prevention, early  
78 16 detection, effective treatment, and ensuring quality of life.  
78 17 The department shall utilize one of the full-time equivalent  
78 18 positions authorized in this subsection for administration of  
78 19 the activities related to the comprehensive cancer control  
78 20 program.

Allocates \$346,224 for the Iowa Consortium for Comprehensive Cancer Control.

DETAIL: This is a decrease of \$141,253 compared to the FY 2009 allocation.

78 21 c. Of the funds appropriated in this subsection, \$161,724  
78 22 shall be used for cervical and colon cancer screening.

Allocates \$161,724 for cervical and colon cancer screening.

DETAIL: This is a decrease of \$37,246 compared to the FY 2009 allocation.

## 78 23 4. COMMUNITY CAPACITY

78 24 ..... \$ 2,253,507

Health Care Trust Fund appropriation to the Community Capacity Program.

DETAIL: This is a decrease of \$536,493 and 6.00 FTE positions compared to the estimated net FY 2009 appropriation. An additional \$4,116,847 is provided to the Community Capacity Program from the

## General Fund in Division I.

78 25 a. Of the funds appropriated in this subsection, \$61,349  
 78 26 shall be deposited in the governmental public health system  
 78 27 fund created by this Act to be used to further develop the  
 78 28 Iowa public health standards and to begin implementation of  
 78 29 public health modernization in accordance with chapter 135A,  
 78 30 as enacted in this Act, to the extent funding is available.

Allocates \$61,349 for local public health redesign efforts. Provides for deposit of the funding into the Governmental Public Health System Fund for expenditure by the Department of Public Health.

DETAIL: This is a decrease of \$13,265 compared to the FY 2009 allocation.

78 31 b. Of the funds appropriated in this subsection, \$163,600  
 78 32 shall be used for the mental health professional shortage area  
 78 33 program implemented pursuant to section 135.80.

Allocates \$163,600 for the Mental Health Professional Shortage Area Program.

DETAIL: This is a decrease of \$35,370 compared to the FY 2009 allocation.

78 34 c. Of the funds appropriated in this subsection, \$40,900  
 78 35 shall be used for a grant to a statewide association of  
 79 1 psychologists that is affiliated with the American  
 79 2 psychological association to be used for continuation of a  
 79 3 program to rotate intern psychologists in placements in urban  
 79 4 and rural mental health professional shortage areas, as  
 79 5 defined in section 135.80.

Allocates \$40,900 to implement a rotation program for intern psychologists in urban and rural mental health professional shortage areas.

DETAIL: This is a decrease of \$8,843 compared to the FY 2009 allocation.

79 6 d. Of the funds appropriated in this subsection, the  
 79 7 following amounts shall be allocated to the Iowa collaborative  
 79 8 safety net provider network established pursuant to section  
 79 9 135.153 to be used for the purposes designated:

Provides for allocations to the Iowa Collaborative Safety Net Provider Network.

79 10 (1) For distribution to the Iowa=Nebraska primary care  
 79 11 association for statewide coordination of the Iowa  
 79 12 collaborative safety net provider network:  
 79 13 ..... \$ 81,800

Allocates \$81,800 for the Iowa Collaborative Safety Net Provider Network.

DETAIL: This is a decrease of \$17,685 compared to the FY 2009 allocation.

79 14	(2) For distribution to the Iowa family planning network	Allocates \$82,796 for family planning network agencies to assist
79 15	agencies for necessary infrastructure, statewide coordination,	patients in finding an appropriate medical home.
79 16	provider recruitment, service delivery, and provision of	
79 17	assistance to patients in determining an appropriate medical	DETAIL: This is a decrease of \$16,689 compared to the FY 2009
79 18	home:	allocation
79 19	..... \$ 82,796	
79 20	(3) For distribution to the local boards of health that	Allocates \$82,796 for local board of health pilot programs in three
79 21	provide direct services for pilot programs in three counties	counties to assist patients in finding an appropriate medical home.
79 22	to assist patients in determining an appropriate medical home:	
79 23	..... \$ 82,796	DETAIL: This is a decrease of \$16,689 compared to the FY 2009
		allocation.
79 24	(4) For distribution to maternal and child health centers	Allocates \$82,796 for three child and maternal health center pilot
79 25	for pilot programs in three counties to assist patients in	programs to assist patients in finding an appropriate medical home.
79 26	determining an appropriate medical home:	
79 27	..... \$ 82,796	DETAIL: This is a decrease of \$16,689 compared to the FY 2009
		allocation.
79 28	(5) For distribution to free clinics for necessary	Allocates \$204,500 for free clinics to assist patients in finding an
79 29	infrastructure, statewide coordination, provider recruitment,	appropriate medical home.
79 30	service delivery, and provision of assistance to patients in	
79 31	determining an appropriate medical home:	DETAIL: This is a decrease of \$44,213 compared to the FY 2009
79 32	..... \$ 204,500	allocation.
79 33	(6) For distribution to rural health clinics for necessary	Allocates \$122,700 for rural health clinics to assist patients in finding
79 34	infrastructure, statewide coordination, provider recruitment,	an appropriate medical home.
79 35	service delivery, and provision of assistance to patients in	
80 1	determining an appropriate medical home:	DETAIL: This is a decrease of \$26,528 compared to the FY 2009
80 2	..... \$ 122,700	allocation.
80 3	(7) For continuation of the safety net provider patient	Allocates \$327,200 for the safety net provider patient access to
80 4	access to specialty health care initiative as described in	specialty care initiative.
80 5	2007 Iowa Acts, ch. 218, section 109:	

80 6 .....	\$ 327,200	DETAIL: This is a decrease of \$70,740 compared to the FY 2009 allocation.
80 7 (8) For continuation of the pharmaceutical infrastructure		
80 8 for safety net providers as described in 2007 Iowa Acts, ch.		Allocates \$327,200 for the pharmaceutical infrastructure for safety net providers.
80 9 218, section 108:		
80 10 .....	\$ 327,200	DETAIL: This is a decrease of \$70,740 compared to the FY 2009 allocation.
80 11 The Iowa collaborative safety net provider network may		
80 12 continue to distribute funds allocated pursuant to this		Permits the Iowa Collaborative Safety Net Provider Network to continue existing contracts to distribute the funding.
80 13 lettered paragraph through existing contracts or renewal of		
80 14 existing contracts.		
80 15 e. Of the funds appropriated in this subsection, \$500,000		Allocates \$500,000 for the Incubation Grant Program for Community Health Centers.
80 16 shall be used to continue funding for the community health		
80 17 center incubation grant program. Funds shall be utilized by		
80 18 the recipient of the grant in the previous fiscal year to		DETAIL: This is a decrease of \$146,654 compared to the FY 2009 allocation. This is funding for the Community Health Center in Sioux City.
80 19 ensure continuation of affordable primary and preventive		
80 20 health care services to the uninsured and underserved in		
80 21 northwest Iowa.		
80 22 f. Of the funds appropriated in this subsection, \$61,350		Allocates \$61,350 for the continued implementation of the Direct Care Worker Task Force recommendations.
80 23 shall be used for continued implementation of the		
80 24 recommendations of the direct care worker task force		
80 25 established pursuant to 2005 Iowa Acts, chapter 88, based upon		DETAIL: This is a decrease of \$13,650 compared to the FY 2009 allocation.
80 26 the report submitted to the governor and the general assembly		
80 27 in December 2006.		
80 28 g. Of the funds appropriated in this subsection, \$114,520		Allocates \$114,520 for an independent statewide direct care worker association.
80 29 shall be used for allocation to an independent statewide		
80 30 direct care worker association for education, outreach,		
80 31 leadership development, mentoring, and other initiatives		DETAIL: This is a decrease of \$25,480 compared to the FY 2009 allocation.
80 32 intended to enhance the recruitment and retention of direct		



80 33 care workers in health and long-term care.

80 34 h. The department may utilize one of the full-time  
80 35 equivalent positions authorized in this subsection for  
81 1 administration of the activities related to the Iowa  
81 2 collaborative safety net provider network.

Requires the Department to utilize 1.00 FTE position for administration of activities related to the Iowa Collaborative Safety Net Provider Network.

81 3 i. The department may utilize one of the full-time  
81 4 equivalent positions authorized in this subsection for  
81 5 administration of the volunteer health care provider program  
81 6 pursuant to section 135.24.

Requires the Department to utilize 1.00 FTE position for administration of the Voluntary Health Care Provider Program.

81 7 Sec. 57. DEPARTMENT OF HUMAN SERVICES. In addition to any  
81 8 other appropriation made in this Act for the purposes  
81 9 designated, there is appropriated from the health care trust  
81 10 fund created in section 453A.35A to the department of human  
81 11 services for the fiscal year beginning July 1, 2009, and  
81 12 ending June 30, 2010, the following amount, or so much thereof  
81 13 as is necessary, for the purpose designated:  
81 14 MEDICAL ASSISTANCE  
81 15 ..... \$111,409,156

Health Care Trust Fund appropriation to the Medicaid Program.

DETAIL: This is a decrease of \$3,534,140 compared to the estimated net FY 2009 appropriation.

81 16 Sec. 58. Section 453A.35, subsection 1, Code 2009, is  
81 17 amended to read as follows:  
81 18 1. The proceeds derived from the sale of stamps and the  
81 19 payment of taxes, fees, and penalties provided for under this  
81 20 chapter, and the permit fees received from all permits issued  
81 21 by the department, shall be credited to the general fund of  
81 22 the state. However, ~~beginning July 1, 2007,~~ of the revenues  
81 23 generated from the tax on cigarettes pursuant to section  
81 24 453A.6, subsection 1, and from the tax on tobacco products as  
81 25 specified in section 453A.43, subsections 1, 2, 3, and 4, and  
81 26 credited to the general fund of the state under this  
81 27 subsection, there is appropriated, annually, to the health  
81 28 care trust fund created in section 453A.35A, the first one

CODE: Reduces the transfer of the \$127,600,000 of revenue to the Health Care Trust Fund from the General Fund to \$116,796,000.

DETAIL: This is a decrease of \$10,804,000 compared to the FY 2009 transfer.

81 29 hundred ~~twenty-seven~~ sixteen million ~~six~~ seven hundred  
81 30 ninety-six thousand dollars.

81 31 DIVISION V  
81 32 IOWACARE

81 33 Sec. 59. 2008 Iowa Acts, chapter 1187, section 44,  
81 34 subsection 3, is amended to read as follows:  
81 35 3. There is appropriated from the IowaCare account created  
82 1 in section 249J.24 to the department of human services for the  
82 2 fiscal year beginning July 1, 2008, and ending June 30, 2009,  
82 3 the following amount, or so much thereof as is necessary, to  
82 4 be used for the purposes designated:

82 5 For distribution to a publicly owned acute care teaching  
82 6 hospital located in a county with a population over three  
82 7 hundred fifty thousand for the provision of medical and  
82 8 surgical treatment of indigent patients, for provision of  
82 9 services to members of the expansion population pursuant to  
82 10 chapter 249J, and for medical education:

82 11 ..... \$ ~~40,000,000~~

82 12 46,000,000

82 13 Notwithstanding any provision of law to the contrary, the  
82 14 amount appropriated in this subsection shall be allocated in  
82 15 twelve equal monthly payments as provided in section 249J.24.  
82 16 Any amount appropriated in this subsection in excess of  
82 17 \$ ~~37,000,000~~ 41,000,000 shall be allocated only if federal  
82 18 funds are available to match the amount allocated.

82 19 Sec. 60. IOWACARE ACCOUNT == DISTRIBUTION AND DEPOSIT OF  
82 20 PROCEEDS OF HOSPITAL TAX LEVY.

82 21 1. Notwithstanding the total amount of proceeds  
82 22 distributed pursuant to section 249J.24, subsection 6,  
82 23 paragraph "a", unnumbered paragraph 1, for the fiscal period  
82 24 beginning July 1, 2008, and ending June 30, 2009, the county  
82 25 treasurer of a county with a population over 350,000 in which

CODE: Increases the FY 2009 IowaCare Account appropriation by  
\$6,000,000 for a total of \$46,000,000 to Broadlawns Medical Center.  
In addition, Broadlawns is guaranteed at least \$41,000,000 as part of  
an agreement to provide \$38,000,000 in Polk County property tax  
dollars to draw down federal financial participation.

CODE: Increases the amount collected in Polk County property tax  
from \$34,000,000 to \$38,000,000 for FY 2009.

82 26 a publicly owned acute care teaching hospital is located shall  
82 27 distribute the proceeds collected pursuant to section 347.7 in  
82 28 a total amount of \$38,000,000, which would otherwise be  
82 29 distributed to the county hospital, to the treasurer of state  
82 30 for deposit in the IowaCare account.

82 31 2. Notwithstanding the amount collected and distributed  
82 32 for deposit in the IowaCare account pursuant to section  
82 33 249J.24, subsection 6, paragraph "a", subparagraph (2), a  
82 34 maximum of \$21,000,000 in proceeds collected pursuant to  
82 35 section 347.7 between January 1, 2009, and June 30, 2009,  
83 1 shall be distributed to the treasurer of state for deposit in  
83 2 the IowaCare account and collections during this time in  
83 3 excess of a maximum of \$21,000,000 shall be distributed to the  
83 4 acute care teaching hospital identified in section 249J.24,  
83 5 subsection 6. However, if the collections for the period  
83 6 between January 1, 2009, and June 30, 2009, do not equal at  
83 7 least \$21,000,000, the initial proceeds collected pursuant to  
83 8 section 347.7 between January 1, 2009, and June 30, 2009, that  
83 9 are in excess of \$17,000,000 and which are distributed to the  
83 10 acute care teaching hospital identified in section 249J.24,  
83 11 subsection 6, shall be redistributed to the treasurer of state  
83 12 for deposit in the IowaCare account in a total amount not to  
83 13 exceed a maximum of \$21,000,000.

CODE: Increases the second of two collections of Polk County tax revenue from \$17,000,000 to \$21,000,000 for FY 2009.

83 14 Sec. 61. EFFECTIVE DATE == RETROACTIVITY. This division  
83 15 of this Act, being deemed of immediate importance, takes  
83 16 effect upon enactment and is retroactively applicable to July  
83 17 1, 2008.

This Division is effective on enactment and is retroactively applicable to July 1, 2008.

83 18 DIVISION VI  
83 19 APPROPRIATIONS == RELATED CHANGES  
83 20 TOBACCO USE PREVENTION AND CONTROL  
83 21 INITIATIVE == HEALTHY IOWANS TOBACCO TRUST

83 22 Sec. 62. 2008 Iowa Acts, chapter 1186, section 1,

CODE: Requires nonreversion of the Healthy Iowans Tobacco Trust

83 23 subsection 2, paragraph a, is amended by adding the following  
83 24 new unnumbered paragraph:  
83 25 NEW UNNUMBERED PARAGRAPH . Notwithstanding section 8.33,  
83 26 moneys appropriated in this lettered paragraph that remain  
83 27 unencumbered or unobligated at the close of the fiscal year  
83 28 shall not revert but shall remain available for expenditure  
83 29 for the purposes designated until the close of the succeeding  
83 30 fiscal year.

FY 2009 appropriation for tobacco use prevention and control in the Department of Public Health (DPH) to FY 2010. The Bill caps the amount of total carryforward from multiple sources to \$1,000,000.

DETAIL: This Section is effective on enactment.

83 31 ADDICTIVE DISORDERS == GENERAL FUND

83 32 Sec. 63. 2008 Iowa Acts, chapter 1187, section 2,  
83 33 subsection 1, is amended by adding the following new  
83 34 paragraph:  
83 35 NEW PARAGRAPH . c. Notwithstanding section 8.33, moneys  
84 1 appropriated in this subsection that remain unencumbered or  
84 2 unobligated at the close of the fiscal year shall not revert  
84 3 but shall remain available for expenditure for the purposes  
84 4 designated until the close of the succeeding fiscal year.

CODE: Requires nonreversion of the General Fund appropriation for Addictive Disorders in the Department of Public Health (DPH) to FY 2010. The Bill caps the amount of total carryforward from multiple sources to \$1,000,000.

DETAIL: This Section is effective on enactment.

84 5 GAMBLING TREATMENT FUND

84 6 Sec. 64. 2008 Iowa Acts, chapter 1187, section 3, is  
84 7 amended by adding the following new subsection:  
84 8 NEW SUBSECTION . 5. Notwithstanding section 8.33, moneys  
84 9 appropriated in this section that remain unencumbered or  
84 10 unobligated at the close of the fiscal year shall not revert  
84 11 but shall remain available for expenditure for the purposes  
84 12 designated until the close of the succeeding fiscal year.

CODE: Requires nonreversion of remaining Gambling Treatment Funds to FY 2010.

DETAIL: The Gambling Treatment Fund is repealed in this Bill. For FY 2009, the funds are part of the Addictive Disorders appropriation to the Department of Public Health.

84 13 IOWA VETERANS HOME FTES

84 14 Sec. 65. 2008 Iowa Acts, chapter 1187, section 4,  
84 15 subsection 2, is amended to read as follows:  
84 16 2. IOWA VETERANS HOME

CODE: Eliminates the FY 2009 FTE cap for the Iowa Veterans Home.

DETAIL: This Section is effective on enactment.

84 17 For salaries, support, maintenance, and miscellaneous  
 84 18 purposes ~~, and for not more than the following full-time~~  
 84 19 ~~equivalent positions :~~  
 84 20 ..... \$ 12,694,154  
 84 21 ..... ~~FTEs 951.95~~  
 84 22 a. The Iowa veterans home billings involving the  
 84 23 department of human services shall be submitted to the  
 84 24 department on at least a monthly basis.  
 84 25 b. If there is a change in the employer of employees  
 84 26 providing services at the Iowa veterans home under a  
 84 27 collective bargaining agreement, such employees and the  
 84 28 agreement shall be continued by the successor employer as  
 84 29 though there had not been a change in employer.  
 84 30 FEDERAL TEMPORARY ASSISTANCE FOR NEEDY FAMILIES

#### 84 31 BLOCK GRANT == FAMILY INVESTMENT PROGRAM

84 32 Sec. 66. 2008 Iowa Acts, chapter 1187, section 5, is  
 84 33 amended by adding the following new unnumbered paragraph:  
 84 34 NEW UNNUMBERED PARAGRAPH . Notwithstanding section 8.33,  
 84 35 moneys appropriated in this section that remain unencumbered  
 85 1 or unobligated at the close of the fiscal year shall not  
 85 2 revert but shall remain available for expenditure for the  
 85 3 family investment program until the close of the succeeding  
 85 4 fiscal year.

CODE: Requires nonreversion of the TANF appropriation for the Family Investment Program (FIP) in the DHS to FY 2010.

DETAIL: This Section is effective on enactment.

#### 85 5 MEDICAL ASSISTANCE

85 6 Sec. 67. 2008 Iowa Acts, chapter 1187, section 9,  
 85 7 unnumbered paragraph 2, is amended to read as follows:  
 85 8 For medical assistance reimbursement and associated costs  
 85 9 as specifically provided in the reimbursement methodologies in  
 85 10 effect on June 30, 2008, except as otherwise expressly  
 85 11 authorized by law, including reimbursement for abortion  
 85 12 services which shall be available under the medical assistance

CODE: Decreases the FY 2009 Medicaid appropriation.

DETAIL: This is a decrease of \$56,326,939 to reflect an across-the-board budget reduction and additional funds available through the federal American Reinvestment and Recovery Act of 2009.

85 13 program only for those abortions which are medically  
85 14 necessary:  
85 15 ..... \$ ~~649,629,269~~  
85 16 593,302,330

85 17 EMERGENCY AND CHILDRENS MENTAL HEALTH SERVICE

85 18 Sec. 68. 2008 Iowa Acts, chapter 1187, section 9,  
85 19 subsection 20, is amended by adding the following new  
85 20 paragraph:  
85 21 NEW PARAGRAPH . cc. The department shall revise the  
85 22 provisions for the projects to implement an emergency mental  
85 23 health crisis services system and a mental health services  
85 24 system for children and youth under paragraph "c",  
85 25 subparagraphs (1) and (2), in order for services to be  
85 26 provided under both of the projects for a period of at least  
85 27 24 months. Notwithstanding section 8.33, moneys allocated for  
85 28 the projects in paragraph "c" of this subsection that remain  
85 29 unencumbered or unobligated at the close of the fiscal year  
85 30 shall not revert but shall remain available for expenditure  
85 31 for the purposes designated until the close of the fiscal year  
85 32 that begins July 1, 2010.

CODE: Requires the DHS to revise projects in the Emergency Mental Health and Children's Mental Health System and extend them to a period of 24 months and utilize existing appropriations to fund the projects through FY 2011.

85 33 STATE SUPPLEMENTARY ASSISTANCE

85 34 Sec. 69. 2008 Iowa Acts, chapter 1187, section 12, is  
85 35 amended by adding the following new subsection:  
86 1 NEW SUBSECTION . 4. Notwithstanding section 8.33, moneys  
86 2 appropriated in this section that remain unencumbered or  
86 3 unobligated at the close of the fiscal year shall remain  
86 4 available for expenditure for the state supplementary  
86 5 assistance program until the close of the succeeding fiscal  
86 6 year.

CODE: Requires nonreversion of FY 2009 State Supplementary Assistance Funds.

DETAIL: The estimated carryforward from FY 2009 to FY 2010 is \$500,000.

86 7 NURSING FACILITIES

86 8 Sec. 70. 2008 Iowa Acts, chapter 1187, section 32,  
86 9 subsection 1, paragraph a, subparagraph (1), is amended to  
86 10 read as follows:

86 11 (1) For the fiscal year beginning July 1, 2008, the total  
86 12 state funding amount for the nursing facility budget shall not  
86 13 exceed ~~\$183,367,323~~ \$158,482,025.

CODE: Reduces the State funding cap for nursing facilities under the Medicaid Program for FY 2009. The cap is reduced to reflect reduced State costs due to the 6.20% Federal Medical Assistance Match (FMAP).

DETAIL: The federal American Recovery and Reinvestment Act of 2009 reduced State funds needed to fund nursing facilities by 6.20% beginning October 1, 2009. There is no change to the overall reimbursement rate for nursing facilities.

#### 86 14 DEPARTMENT OF ELDER AFFAIRS == MATCHING FUNDS

86 15 Sec. 71. 2008 Iowa Acts, chapter 1187, section 39, is  
86 16 amended by adding the following new subsection:  
86 17 NEW SUBSECTION . 4. Notwithstanding section 8.33, of the  
86 18 funds appropriated in this section, \$216,242 shall not revert  
86 19 at the close of the fiscal year, but shall remain available to  
86 20 provide matching funds for the senior nutrition programs and  
86 21 the senior internship program funded through the federal  
86 22 American Reinvestment and Recovery Act of 2009 for the period  
86 23 during which federal funding is available under the Act.

CODE: Permits the Department of Elder Affairs to carryforward \$216,242 from the Senior Living Trust Fund to be used to match \$1,337,965 of federal funds.

DETAIL: The American Reinvestment and Recovery Act of 2009 provided additional funds to states for the Senior Nutrition Program and the Senior Internship Program requires the State to provide 15.00% matching funds.

#### 86 24 ACCOUNT FOR HEALTH CARE TRANSFORMATION

86 25 Sec. 72. 2008 Iowa Acts, chapter 1187, section 46, is  
86 26 amended to read as follows:  
86 27 ~~Sec. 46. TRANSFER FROM ACCOUNT FOR HEALTH CARE~~  
86 28 ~~TRANSFORMATION. There is transferred from the account for~~  
86 29 ~~health care transformation created pursuant to section 249J.23~~  
86 30 ~~to the IowaCare account created in section 249J.24 a total of~~  
86 31 ~~\$3,000,000 for the fiscal year beginning July 1, 2008, and~~  
86 32 ~~ending June 30, 2009.~~

CODE: Repeals the transfer of \$3,000,000 from the HCTA to the IowaCare Account.

DETAIL: With additional federal revenue the funds are no longer needed.

#### 86 33 MEDICAL ASSISTANCE PROGRAM NONREVERSION

86 34 Sec. 73. 2008 Iowa Acts, chapter 1187, section 50, is  
 86 35 amended to read as follows:  
 87 1 SEC. 50. MEDICAL ASSISTANCE PROGRAM == ~~REVERSION TO SENIOR~~  
 87 2 ~~LIVING TRUST FUND~~ NONREVERSION FOR FY 2008=2009.  
 87 3 Notwithstanding section 8.33, if moneys appropriated for  
 87 4 purposes of the medical assistance program for the fiscal year  
 87 5 beginning July 1, 2008, and ending June 30, 2009, from the  
 87 6 general fund of the state, the senior living trust fund, the  
 87 7 healthy lowans tobacco trust fund, the health care trust fund,  
 87 8 and the property tax relief fund are in excess of actual  
 87 9 expenditures for the medical assistance program and remain  
 87 10 unencumbered or unobligated at the close of the fiscal year,  
 87 11 the excess moneys shall not revert but shall ~~be transferred to~~  
 87 12 ~~the senior living trust fund created in section 249H.4~~ remain  
 87 13 available for expenditure for the purposes of the medical  
 87 14 assistance program until the close of the fiscal year  
 87 15 beginning July 1, 2009 .

CODE: Requires nonreversion of funds remaining in the Medical Assistance Program through FY 2010.

DETAIL: The federal American Reinvestment and Recovery Act of 2009 prohibits Medicaid stimulus funds from being deposited in a reserve or rainy day fund. This would keep any unspent funds in the Medicaid Program.

87 16 ADDICTIVE DISORDERS == HEALTH CARE TRUST FUND  
 87 17 Sec. 74. 2008 Iowa Acts, chapter 1187, section 62,  
 87 18 subsection 1, is amended by adding the following new  
 87 19 paragraph:  
 87 20 NEW PARAGRAPH . d. Notwithstanding section 8.33, moneys  
 87 21 appropriated in this subsection that remain unencumbered or  
 87 22 unobligated at the close of the fiscal year shall not revert  
 87 23 but shall remain available for expenditure for the purposes  
 87 24 designated until the close of the succeeding fiscal year.

CODE: Requires nonreversion of the FY 2009 Health Care Trust Fund Addictive Disorders appropriation through FY 2010.

DETAIL: This Section is effective on enactment.

#### 87 25 VIETNAM CONFLICT VETERANS BONUS FUND

87 26 Sec. 75. 2007 Iowa Acts, chapter 176, section 3,  
 87 27 unnumbered paragraph 3, as enacted by 2008 Iowa Acts, chapter  
 87 28 1187, section 68, is amended to read as follows:  
 87 29 Notwithstanding section 8.33, moneys appropriated in this  
 87 30 section that remain unencumbered or unobligated at the close

CODE: Requires nonreversion of the FY 2008 appropriation for the Vietnam Conflict Veterans Bonus Fund through FY 2010.

DETAIL: This Section is effective on enactment.



87 31 of the fiscal year shall not revert but shall remain available  
 87 32 for expenditure for the purposes designated until the close of  
 87 33 the ~~succeeding~~ fiscal year beginning July 1, 2009 .

#### 87 34 INJURED VETERANS GRANT PROGRAM

87 35 Sec. 76. 2006 Iowa Acts, chapter 1184, section 5, as  
 88 1 enacted by 2007 Iowa Acts, chapter 203, section 1, subsection  
 88 2 4, unnumbered paragraph 2, and amended by 2008 Iowa Acts,  
 88 3 chapter 1187, section 69, is amended to read as follows:  
 88 4 Notwithstanding section 8.33, moneys appropriated in this  
 88 5 subsection that remain unencumbered or unobligated at the  
 88 6 close of the fiscal year shall not revert but shall remain  
 88 7 available for expenditure for the purposes designated until  
 88 8 the close of the fiscal year beginning July 1, ~~2008~~ 2009 .

CODE: Requires nonreversion of the FY 2007 Injured Veterans Grant Program appropriation through FY 2010.

DETAIL: This Section is effective on enactment.

88 9 Sec. 77. 2008 Iowa Acts, chapter 1188, section 16, is  
 88 10 amended to read as follows:  
 88 11 SEC. 16. MEDICAL ASSISTANCE, HAWK=I, AND HAWK=I EXPANSION  
 88 12 PROGRAMS == COVERING CHILDREN == APPROPRIATION. There is  
 88 13 appropriated from the general fund of the state to the  
 88 14 department of human services for the designated fiscal years,  
 88 15 the following amounts, or so much thereof as is necessary, for  
 88 16 the purpose designated:  
 88 17 To cover children as provided in this Act under the medical  
 88 18 assistance, hawk=i, and hawk=i expansion programs and outreach  
 88 19 under the current structure of the programs:  
 88 20 FY 2008=2009 ..... \$ 4,800,000  
 88 21 FY 2009=2010 ..... \$ ~~14,800,000~~  
 88 22 4,207,001  
 88 23 FY 2010=2011 ..... \$ 24,800,000

CODE: Reduces the FY 2010 appropriation to cover children under the Medical Assistance and hawk-i Programs. The FY 2010 appropriation was reduced by a general reduction of 12.80%.

88 24 Sec. 78. CHILD CARE CREDIT FUND BALANCE TRANSFERRED.  
 88 25 Moneys in the child care credit fund that remain unencumbered  
 88 26 or unobligated at the close of the fiscal year beginning July

Transfers money remaining in the Child Care Credit Fund to the State General Fund at the close of FY 2009.

DETAIL: This Section is effective on enactment.

88 27 1, 2008, are transferred to the general fund of the state.

88 28 Sec. 79. ADDICTIVE DISORDERS NONREVERSION DIRECTIVE. The  
88 29 authority provided in this division of this Act for  
88 30 nonreversion of the appropriations for addictive disorder  
88 31 conditions referenced in this section is limited to \$1,000,000  
88 32 and shall be realized by applying the authority to such  
88 33 appropriations in the following order until the limitation  
88 34 amount is reached:

88 35 1. The appropriation made from the healthy Iowans tobacco  
89 1 trust in 2008 Iowa Acts, chapter 1186, section 1.  
89 2 2. The appropriation made from the health care trust fund  
89 3 in 2008 Iowa Acts, chapter 1187, section 62, subsection 1.  
89 4 3. The appropriation made from the general fund of the  
89 5 state in 2008 Iowa Acts, chapter 1187, section 2, subsection  
89 6 1.

Specifies the order of priority for carrying forward remaining FY 2009 Addictive Disorders funds to FY 2010 totaling \$1,000,000. This includes:

- First from the Healthy Iowans Tobacco Trust Fund.
- Second from the Health Care Trust Fund.
- Third from the General Fund.

DETAIL: This Section is effective on enactment.

89 7 Sec. 80. EFFECTIVE DATE. This division of this Act, being  
89 8 deemed of immediate importance, takes effect upon enactment.

Specifies that the Sections relating to the carryforward of funding take effect upon enactment.

89 9 DIVISION VII  
89 10 HEPATITIS AWARENESS

89 11 Sec. 81. Section 135.19, Code 2009, is amended to read as  
89 12 follows:  
89 13 135.19 VIRAL HEPATITIS PROGRAM == AWARENESS, VACCINATIONS ,  
89 14 AND TESTING == STUDY.

89 15 1. If sufficient funds are appropriated by the general  
89 16 assembly, the department shall establish and administer a  
89 17 viral hepatitis program. The goal of the program shall be to  
89 18 distribute information to citizens of this state who are at an  
89 19 increased risk for exposure to viral hepatitis regarding the  
89 20 higher incidence of hepatitis C exposure and infection among  
89 21 these populations, the dangers presented by the disease, and  
89 22 contacts for additional information and referrals. The

CODE: Requires the DPH to consult with the Department of Veterans Affairs regarding the Hepatitis Awareness Program.

89 23 program shall also make available hepatitis A and hepatitis B  
89 24 vaccinations, and hepatitis C testing.  
89 25 2. The department shall establish by rule a list of  
89 26 individuals by category who are at increased risk for viral  
89 27 hepatitis exposure. The list shall be consistent with  
89 28 recommendations developed by the centers for disease control,  
89 29 and shall be developed in consultation with the Iowa viral  
89 30 hepatitis task force and the Iowa department of veterans  
89 31 affairs . The department shall also establish by rule what  
89 32 information is to be distributed and the form and manner of  
89 33 distribution. The rules shall also establish a vaccination  
89 34 and testing program, to be coordinated by the department  
89 35 through local health departments and clinics and other  
90 1 appropriate locations .

90 2 ~~3. The department shall conduct a study to provide an~~  
90 3 ~~epidemiological profile of hepatitis C and to assess its~~  
90 4 ~~current and future impact on the state. The department shall~~  
90 5 ~~submit a report to the members of the general assembly by~~  
90 6 ~~January 1, 2008, regarding the results of the study, and shall~~  
90 7 ~~include a status report regarding the development and~~  
90 8 ~~distribution of viral hepatitis information, and the results~~  
90 9 ~~of the vaccination and testing program.~~

90 10 Sec. 82. Section 135.20, Code 2009, is repealed.

CODE: Repeals the Veterans Hepatitis C Awareness Program.  
Veterans are included in the Hepatitis Awareness Program in Section  
135.19, Code of Iowa.

90 11 DIVISION VIII

90 12 SENIOR LIVING COORDINATING UNIT

90 13 Sec. 83. Section 231.58, Code 2009, is amended by striking  
90 14 the section and inserting in lieu thereof the following:

90 15 231.58 LONG-TERM LIVING COORDINATION.

90 16 The director may convene meetings, as necessary, of the  
90 17 director and the directors of human services, public health,  
90 18 and inspections and appeals, to assist in the coordination of

CODE: Eliminates the Senior Living Coordinating Unit. The Director  
of Elder Affairs is given the authority to convene a meeting with the  
Department of Public Health, Department of Human Services, and the  
Department of Inspections and Appeals to assist in the coordination of  
policy, services and planning.

90 19 policy, service delivery, and long-range planning relating to  
90 20 the long-term living system and older lowans in the state.  
90 21 The group may consult with individuals, institutions and  
90 22 entities with expertise in the area of the long-term living  
90 23 system and older lowans, as necessary, to facilitate the  
90 24 group's efforts.

90 25 Sec. 84. Section 249H.3, subsection 6, paragraph b, Code  
90 26 2009, is amended to read as follows:  
90 27 b. New construction for long-term care alternatives,  
90 28 excluding new construction of assisted-living programs or  
90 29 elder group homes, if ~~the senior living coordinating unit~~  
90 30 ~~determines that~~ new construction is more cost-effective than  
90 31 the conversion of existing space.

CODE: Eliminates the Senior Living Coordinating Unit.

90 32 Sec. 85. Section 249H.3, subsection 8, paragraph b, Code  
90 33 2009, is amended to read as follows:  
90 34 b. New construction of an assisted-living program if  
90 35 existing nursing facility beds are no longer licensed and ~~the~~  
91 1 ~~senior living coordinating unit determines that~~ new  
91 2 construction is more cost-effective than the conversion of  
91 3 existing space.

CODE: Eliminates the Senior Living Coordinating Unit.

91 4 Sec. 86. Section 249H.3, subsection 12, Code 2009, is  
91 5 amended by striking the subsection.

CODE: Eliminates the Senior Living Coordinating Unit.

91 6 Sec. 87. Section 249H.4, subsection 6, Code 2009, is  
91 7 amended by striking the subsection.

CODE: Eliminates the Senior Living Coordinating Unit.

91 8 Sec. 88. Section 249H.7, subsection 1, Code 2009, is  
91 9 amended to read as follows:  
91 10 1. ~~Beginning October 1, 2000, the~~ The department of elder  
91 11 affairs, ~~in consultation with the senior living coordinating~~  
91 12 ~~unit,~~ shall use funds appropriated from the senior living

CODE: Eliminates the Senior Living Coordinating Unit.

91 13 trust fund for activities related to the design, maintenance,  
91 14 or expansion of home and community-based services for seniors,  
91 15 including but not limited to adult day services, personal  
91 16 care, respite, homemaker, chore, and transportation services  
91 17 designed to promote the independence of and to delay the use  
91 18 of institutional care by seniors with low and moderate  
91 19 incomes. At any time that moneys are appropriated, the  
91 20 department of elder affairs ~~, in consultation with the senior~~  
91 21 ~~living coordinating unit~~, shall disburse the funds to the area  
91 22 agencies on aging.

91 23 Sec. 89. Section 249H.7, subsection 2, unnumbered  
91 24 paragraph 1, Code 2009, is amended to read as follows:  
91 25 The department of elder affairs shall adopt rules, in  
91 26 consultation with the ~~senior living coordinating unit and the~~  
91 27 area agencies on aging, pursuant to chapter 17A, to provide  
91 28 all of the following:

CODE: Eliminates the Senior Living Coordinating Unit.

91 29 Sec. 90. Section 249H.7, subsection 2, paragraph c, Code  
91 30 2009, is amended to read as follows:  
91 31 c. Other procedures the department of elder affairs deems  
91 32 necessary for the proper administration of this section ;  
91 33 ~~including but not limited to the submission of progress~~  
91 34 ~~reports, on a bimonthly basis, to the senior living~~  
91 35 ~~coordinating unit .~~

CODE: Eliminates the Senior Living Coordinating Unit.

92 1 Sec. 91. Section 249H.9, subsection 1, Code 2009, is  
92 2 amended to read as follows:  
92 3 1. The department of elder affairs and the area agencies  
92 4 on aging ~~, in consultation with the senior living coordinating~~  
92 5 ~~unit~~, shall create, on a county basis, a database directory of  
92 6 all health care and support services available to seniors.  
92 7 The department of elder affairs shall make the database  
92 8 electronically available to the public, and shall update the  
92 9 database on at least a monthly basis.

CODE: Eliminates the Senior Living Coordinating Unit.

92 10 Sec. 92. Section 249H.10, Code 2009, is amended to read as  
92 11 follows:  
92 12 249H.10 CAREGIVER SUPPORT == ACCESS AND EDUCATION  
92 13 PROGRAMS.  
92 14 The department of human services and the department of  
92 15 elder affairs ~~, in consultation with the senior living~~  
92 16 ~~coordinating unit~~, shall implement a caregiver support program  
92 17 to provide access to respite care and to provide education to  
92 18 caregivers in providing appropriate care to seniors and  
92 19 persons with disabilities. The program shall be provided  
92 20 through the area agencies on aging or other appropriate  
92 21 agencies.

CODE: Eliminates the Senior Living Coordinating Unit.

92 22 DIVISION IX  
92 23 GAMBLING TREATMENT FUND ELIMINATION

92 24 Sec. 93. Section 8.57, subsection 6, paragraph e,  
92 25 subparagraph (1), Code 2009, is amended to read as follows:  
92 26 (1) Notwithstanding provisions to the contrary in sections  
92 27 99D.17 and 99F.11, for the fiscal year beginning July 1, 2000,  
92 28 and for each fiscal year thereafter, not more than a total of  
92 29 ~~sixty~~ sixty=six million dollars shall be deposited in the  
92 30 general fund of the state in any fiscal year pursuant to  
92 31 sections 99D.17 and 99F.11. The next fifteen million dollars  
92 32 of the moneys directed to be deposited in the general fund of  
92 33 the state in a fiscal year pursuant to sections 99D.17 and  
92 34 99F.11 shall be deposited in the vision Iowa fund created in  
92 35 section 12.72 for the fiscal year beginning July 1, 2000, and  
93 1 for each fiscal year through the fiscal year beginning July 1,  
93 2 2019. The next five million dollars of the moneys directed to  
93 3 be deposited in the general fund of the state in a fiscal year  
93 4 pursuant to sections 99D.17 and 99F.11 shall be deposited in  
93 5 the school infrastructure fund created in section 12.82 for  
93 6 the fiscal year beginning July 1, 2000, and for each fiscal  
93 7 year thereafter until the principal and interest on all bonds  
93 8 issued by the treasurer of state pursuant to section 12.81 are

CODE: Increases the General Fund transfer from gambling proceeds from \$60,000,000 per year to \$66,000,000 per year. This reflects the action to funding gambling treatment programs from the General Fund and eliminate the same \$6,000,000 transfer to the Gambling Treatment Program. The change does not impact the funding remaining for the Rebuild Iowa Infrastructure Fund.

93 9 paid, as determined by the treasurer of state. The total  
93 10 moneys in excess of the moneys deposited in the general fund  
93 11 of the state, the vision Iowa fund, and the school  
93 12 infrastructure fund in a fiscal year shall be deposited in the  
93 13 rebuild Iowa infrastructure fund and shall be used as provided  
93 14 in this section, notwithstanding section 8.60.

93 15 Sec. 94. Section 99D.7, subsection 22, Code 2009, is  
93 16 amended to read as follows:  
93 17 22. To require licensees to establish a process to allow a  
93 18 person to be voluntarily excluded for life from a racetrack  
93 19 enclosure and all other licensed facilities under this chapter  
93 20 and chapter 99F. The process established shall require that a  
93 21 licensee disseminate information regarding persons voluntarily  
93 22 excluded to all licensees under this chapter and chapter 99F.  
93 23 The state and any licensee under this chapter or chapter 99F  
93 24 shall not be liable to any person for any claim which may  
93 25 arise from this process. In addition to any other penalty  
93 26 provided by law, any money or thing of value that has been  
93 27 obtained by, or is owed to, a voluntarily excluded person by a  
93 28 licensee as a result of wagers made by the person after the  
93 29 person has been voluntarily excluded shall not be paid to the  
93 30 person but shall be ~~deposited into~~ credited to the gambling  
93 31 ~~treatment general fund created in section 135.150 of the~~  
93 32 state.

CODE: Reflects the elimination of the Gambling Treatment Fund.

93 33 Sec. 95. Section 99D.15, subsection 5, Code 2009, is  
93 34 amended by striking the subsection.

CODE: Reflects the elimination of the Gambling Treatment Fund.

93 35 Sec. 96. Section 99F.4, subsection 22, Code 2009, is  
94 1 amended to read as follows:  
94 2 22. To require licensees to establish a process to allow a  
94 3 person to be voluntarily excluded for life from an excursion  
94 4 gambling boat and all other licensed facilities under this  
94 5 chapter and chapter 99D. The process established shall  
94 6 require that a licensee disseminate information regarding

CODE: Reflects the elimination of the Gambling Treatment Fund.

94 7 persons voluntarily excluded to all licensees under this  
94 8 chapter and chapter 99D. The state and any licensee under  
94 9 this chapter or chapter 99D shall not be liable to any person  
94 10 for any claim which may arise from this process. In addition  
94 11 to any other penalty provided by law, any money or thing of  
94 12 value that has been obtained by, or is owed to, a voluntarily  
94 13 excluded person by a licensee as a result of wagers made by  
94 14 the person after the person has been voluntarily excluded  
94 15 shall not be paid to the person but shall be ~~deposited into~~  
94 16 credited to the gambling treatment general fund created in  
94 17 section 135.150 of the state .

94 18 Sec. 97. Section 99F.11, subsection 3, paragraph c, Code  
94 19 2009, is amended by striking the paragraph.

CODE: Reflects the elimination of the Gambling Treatment Fund.

94 20 Sec. 98. Section 99G.39, subsection 1, Code 2009, is  
94 21 amended to read as follows:  
94 22 1. Upon receipt of any revenue, the chief executive  
94 23 officer shall deposit the moneys in the lottery fund created  
94 24 pursuant to section 99G.40. At least fifty percent of the  
94 25 projected annual revenue accruing from the sale of tickets or  
94 26 shares shall be allocated for payment of prizes to the holders  
94 27 of winning tickets. After the payment of prizes, the  
94 28 ~~following shall be deducted from the authority's revenue prior~~  
94 29 ~~to disbursement:~~  
94 30 ~~a. An amount equal to one-half of one percent of the gross~~  
94 31 ~~lottery revenue for the year shall be deposited in the~~  
94 32 ~~gambling treatment fund created in section 135.150.~~  
94 33 ~~b. The expenses of conducting the lottery shall be~~  
94 34 ~~deducted from the authority's revenue prior to disbursement .~~  
94 35 Expenses for advertising production and media purchases shall  
95 1 not exceed four percent of the authority's gross revenue for  
95 2 the year.

CODE: Reflects the elimination of the Gambling Treatment Fund.

95 3 Sec. 99. Section 135.150, Code 2009, is amended to read as  
95 4 follows:

CODE: Reflects the elimination of the Gambling Treatment Fund.  
Requires the DPH to continue the Gambling Treatment Program.



95 5 135.150 GAMBLING TREATMENT FUND == PROGRAM == STANDARDS

95 6 AND LICENSING.

95 7 1. A gambling treatment fund is created in the state  
95 8 treasury under the control of the department. The fund  
95 9 consists of all moneys appropriated to the fund. However, if  
95 10 moneys appropriated to the fund in a fiscal year exceed six  
95 11 million dollars, the amount exceeding six million dollars  
95 12 shall be transferred to the rebuild Iowa infrastructure fund  
95 13 created in section 8.57. Moneys in the fund are appropriated  
95 14 to the department for the purposes described in this section.

95 15 2. 1. a. Moneys appropriated to the department under  
95 16 this section shall be for the purpose of operating The  
95 17 department shall operate a gambling treatment program and  
95 18 shall be used for funding of administrative costs and to  
95 19 provide programs which may include ; but are not limited to ;  
95 20 outpatient and follow-up treatment for persons affected by  
95 21 problem gambling, rehabilitation and residential treatment  
95 22 programs, information and referral services, crisis call  
95 23 access, education and preventive services, and financial  
95 24 management and credit counseling services.  
95 25 b. A person shall not maintain or conduct a gambling  
95 26 treatment program funded ~~under this section~~ through the  
95 27 department unless the person has obtained a license for the  
95 28 program from the department. The department shall adopt rules  
95 29 to establish standards for the licensing and operation of  
95 30 gambling treatment programs under this section. The rules  
95 31 shall specify, but are not limited to specifying, the  
95 32 qualifications for persons providing gambling treatment  
95 33 services, standards for the organization and administration of  
95 34 gambling treatment programs, and a mechanism to monitor  
95 35 compliance with this section and the rules adopted under this  
96 1 section.

96 2 3. ~~Notwithstanding section 12C.7, subsection 2, interest~~  
96 3 ~~or earnings on moneys deposited in the gambling treatment fund~~  
96 4 ~~shall be credited to the gambling treatment fund.~~  
96 5 ~~Notwithstanding section 8.33, moneys credited to the gambling~~  
96 6 ~~treatment fund shall not revert to the fund from which~~  
96 7 ~~appropriated at the close of a fiscal year.~~

96 8 4. 2. The department shall report semiannually to the  
96 9 legislative government oversight committees regarding the  
96 10 operation of the gambling treatment fund and program. The  
96 11 report shall include, but is not limited to, information on  
96 12 ~~revenues and expenses related to the fund for the previous~~  
96 13 ~~period, fund balances for the period, and the~~ moneys expended  
96 14 and grants awarded for operation of the gambling treatment  
96 15 program.

96 16 Sec. 100. GAMBLING TREATMENT FUND BALANCE TRANSFERRED ==  
96 17 EFFECTIVE DATE.

Transfers the funds remaining in the Gambling Treatment Fund transfer to the State General Fund at the end of FY 2009.

96 18 1. Moneys in the gambling treatment fund that remain  
96 19 unencumbered or unobligated at the close of the fiscal year  
96 20 beginning July 1, 2008, are transferred to the general fund of  
96 21 the state.

DETAIL: This Section is effective on enactment.

96 22 2. This section of this Act, being deemed of immediate  
96 23 importance, takes effect upon enactment.

96 24 DIVISION X

96 25 CHILD DEATH REVIEW TEAM

96 26 Sec. 101. Section 135.43, subsection 1, Code 2009, is  
96 27 amended to read as follows:

CODE: Establishes the Child Death Review Team as part of the Office of the State Medical Examiner.

96 28 1. An Iowa child death review team is established as ~~an~~  
96 29 ~~independent agency of state government~~ part of the office of  
96 30 the state medical examiner . The ~~Iowa department of public~~  
96 31 ~~health~~ office of the state medical examiner shall provide  
96 32 staffing and administrative support to the team.

96 33 Sec. 102. Section 135.43, subsection 2, unnumbered  
96 34 paragraph 1, Code 2009, is amended to read as follows:  
96 35 The membership of the review team is subject to the  
97 1 provisions of sections 69.16 and 69.16A, relating to political  
97 2 affiliation and gender balance. Review team members who are  
97 3 not designated by another appointing authority shall be

CODE: Reflects the transfer of duties from the Department of Public Health to the Office of the State Medical Examiner regarding the Child Death Review Team.

97 4 appointed by the ~~director of public health~~ state medical  
97 5 examiner . Membership terms shall be for three years. A  
97 6 membership vacancy shall be filled in the same manner as the  
97 7 original appointment. The review team shall elect a  
97 8 chairperson and other officers as deemed necessary by the  
97 9 review team. The review team shall meet upon the call of the  
97 10 chairperson, upon the request of a state agency, or as  
97 11 determined by the review team. The members of the team are  
97 12 eligible for reimbursement of actual and necessary expenses  
97 13 incurred in the performance of their official duties. The  
97 14 review team shall include the following:

97 15 Sec. 103. Section 135.43, subsection 4, unnumbered  
97 16 paragraph 1, Code 2009, is amended to read as follows:  
97 17 The review team shall develop protocols for a child  
97 18 fatality review committee, to be appointed by the ~~director~~  
97 19 state medical examiner on an ad hoc basis, to immediately  
97 20 review the child abuse assessments which involve the fatality  
97 21 of a child under age eighteen. The ~~director~~ state medical  
97 22 examiner shall appoint a medical examiner, a pediatrician, and  
97 23 a person involved with law enforcement to the committee.

CODE: Reflects the transfer of duties from the Department of Public Health to the Office of the State Medical Examiner regarding the Child Death Review Team.

97 24 Sec. 104. Section 135.43, subsections 7 and 8, Code 2009,  
97 25 are amended to read as follows:

97 26 7. a. The state medical examiner, the Iowa department of  
97 27 public health, and the department of human services shall  
97 28 adopt rules providing for disclosure of information which is  
97 29 confidential under chapter 22 or any other provision of state  
97 30 law, to the review team for purposes of performing its child  
97 31 death and child abuse review responsibilities.

97 32 b. A person in possession or control of medical,  
97 33 investigative, assessment, or other information pertaining to  
97 34 a child death and child abuse review shall allow the  
97 35 inspection and reproduction of the information by the  
98 1 ~~department~~ office of the state medical examiner upon the  
98 2 request of the ~~department~~ office , to be used only in the

CODE: Reflects the transfer of duties from the Department of Public Health to the Office of the State Medical Examiner regarding the Child Death Review Team.

98 3 administration and for the duties of the Iowa child death  
98 4 review team. Except as provided for a report on a child  
98 5 fatality by an ad hoc child fatality review committee under  
98 6 subsection 4, information and records produced under this  
98 7 section which are confidential under section 22.7 and chapter  
98 8 235A, and information or records received from the  
98 9 confidential records, remain confidential under this section.  
98 10 A person does not incur legal liability by reason of releasing  
98 11 information to the department as required under and in  
98 12 compliance with this section.  
98 13 8. Review team members and their agents are immune from  
98 14 any liability, civil or criminal, which might otherwise be  
98 15 incurred or imposed as a result of any act, omission,  
98 16 proceeding, decision, or determination undertaken or  
98 17 performed, or recommendation made as a review team member or  
98 18 agent provided that the review team members or agents acted in  
98 19 good faith and without malice in carrying out their official  
98 20 duties in their official capacity. The ~~department~~ state  
98 21 medical examiner shall adopt rules pursuant to chapter 17A to  
98 22 administer this subsection. A complainant bears the burden of  
98 23 proof in establishing malice or lack of good faith in an  
98 24 action brought against review team members involving the  
98 25 performance of their duties and powers under this section.

98 26 Sec. 105. Section 691.6, Code 2009, is amended by adding  
98 27 the following new subsection:  
98 28 NEW SUBSECTION . 10. To provide staffing and support for  
98 29 the child death review team and any child fatality review  
98 30 committee under section 135.43.

CODE: Requires the State Medical Examiner to provide staffing and support for the Child Death Review Team.

98 31 Sec. 106. CHILD DEATH REVIEW TEAM RULES. The rules  
98 32 adopted by the department of public health for purposes of the  
98 33 child death review team under section 135.43 shall remain in  
98 34 effect until replaced by rules adopted for purposes of that  
98 35 section by the state medical examiner. Until replacement  
99 1 rules are adopted, the office of the state medical examiner

Provides that Department of Public Health administrative rules for the Child Death Review Team are effective until replacement rules are adopted by the Office of the State Medical Examiner.

99 2 shall fulfill the duties assigned to the department of public  
99 3 health under the rules being replaced.

99 4 DIVISION XI

99 5 PUBLIC HEALTH MODERNIZATION

99 6 Sec. 107. LEGISLATIVE FINDINGS AND INTENT == PURPOSE. The  
99 7 general assembly finds all of the following:

Specifies Legislative intent for Iowa's Public Health System.

99 8 1. A sound public health system is vital to the good  
99 9 health of all Iowans. Iowa's public health system reduces  
99 10 health care costs by promoting healthy behaviors, preventing  
99 11 disease and injury, and protecting the health of the  
99 12 population.

99 13 2. The current foundation and organizational capacity for  
99 14 the governmental public health system does not allow for the  
99 15 equitable delivery of public health services. Governmental  
99 16 public health is provided by county boards of health, city  
99 17 boards of health, one district board of health, the state  
99 18 board of health, and the department. Varying degrees of  
99 19 authority, administration, and organizational capacity for  
99 20 providing public health services exist from community to  
99 21 community.

99 22 3. The Iowa public health modernization Act will allow  
99 23 boards of health, designated local public health agencies, and  
99 24 the department to increase system capacity, improve the  
99 25 equitable delivery of public health services, address quality  
99 26 improvement, improve system performance, and provide a  
99 27 foundation to measure outcomes through a voluntary  
99 28 accreditation program. The Iowa public health modernization  
99 29 Act will assure the public of the availability of a basic  
99 30 level of public health service in every community.

99 31 4. The Iowa public health modernization Act is the result  
99 32 of extensive collaboration among governmental public health  
99 33 entities, including local boards of health, local public  
99 34 health agencies, the department, and the state board of  
99 35 health; academia; and professional associations.

100 1 Sec. 108. NEW SECTION . 135A.1 SHORT TITLE.  
100 2 This chapter shall be known and may be cited as the "Iowa  
100 3 Public Health Modernization Act".

CODE: Establishes Chapter 135A.1, Code of Iowa, as the Iowa  
Public Health Modernization Act.

100 4 Sec. 109. NEW SECTION . 135A.2 DEFINITIONS.  
100 5 As used in this chapter, unless the context otherwise  
100 6 requires, the following definitions apply:  
100 7 1. "Academic institution" means an institution of higher  
100 8 education in the state which grants undergraduate and  
100 9 postgraduate degrees and is accredited by a nationally  
100 10 recognized accrediting agency as determined by the United  
100 11 States secretary of education. For purposes of this  
100 12 definition, "accredited" means a certification of the quality  
100 13 of an institution of higher education.  
100 14 2. "Accrediting entity" means a legal, independent,  
100 15 nonprofit or governmental entity or entities approved by the  
100 16 state board of health for the purpose of accrediting  
100 17 designated local public health agencies and the department  
100 18 pursuant to the voluntary accreditation program developed  
100 19 under this chapter.  
100 20 3. "Administration" means the operational procedures,  
100 21 personnel and fiscal management systems, and facility  
100 22 requirements that must be in place for the delivery and  
100 23 assurance of public health services.  
100 24 4. "Committee" means the governmental public health  
100 25 evaluation committee as established in this chapter.  
100 26 5. "Communication and information technology" means the  
100 27 processes, procedures, and equipment needed to provide public  
100 28 information and transmit and receive information among public  
100 29 health entities and community partners; and applies to the  
100 30 procedures, physical hardware, and software required to  
100 31 transmit, receive, and process electronic information.  
100 32 6. "Council" means the governmental public health advisory  
100 33 council as established in this chapter.  
100 34 7. "Department" means the department of public health.  
100 35 8. "Designated local public health agency" means an entity  
101 1 that is either governed by or contractually responsible to a

CODE: Provides for definitions related to the Public Health  
Modernization Act.

101 2 local board of health and designated by the local board to  
101 3 comply with the Iowa public health standards for a  
101 4 jurisdiction.  
101 5 9. "Governance" means the functions and responsibilities  
101 6 of the local boards of health and the state board of health to  
101 7 oversee governmental public health matters.  
101 8 10. "Governmental public health system" means the system  
101 9 described in section 135A.6.  
101 10 11. "Iowa public health standards" means the governmental  
101 11 public health standards adopted by rule by the state board of  
101 12 health.  
101 13 12. "Local board of health" means a county or district  
101 14 board of health.  
101 15 13. "Organizational capacity" means the governmental  
101 16 public health infrastructure that must be in place in order to  
101 17 deliver public health services.  
101 18 14. "Public health region" means, at a minimum, one of six  
101 19 geographical areas approved by the state board of health for  
101 20 the purposes of coordination, resource sharing, and planning  
101 21 and to improve delivery of public health services.  
101 22 15. "Public health services" means the basic public health  
101 23 services that all Iowans should reasonably expect to be  
101 24 provided by designated local public health agencies and the  
101 25 department.  
101 26 16. "Voluntary accreditation" means verification of a  
101 27 designated local public health agency or the department that  
101 28 demonstrates compliance with the Iowa public health standards  
101 29 by an accrediting entity.  
101 30 17. "Workforce" means the necessary qualified and  
101 31 competent staff required to deliver public health services.

101 32 Sec. 110. NEW SECTION . 135A.3 GOVERNMENTAL PUBLIC HEALTH  
101 33 SYSTEM MODERNIZATION == LEAD AGENCY.

101 34 1. The department is designated as the lead agency in this  
101 35 state to administer this chapter.

102 1 2. The department, in collaboration with the governmental  
102 2 public health advisory council and the governmental public

CODE: Establishes the Department of Public Health as the lead State  
agency to administer the Public Health Modernization Act.

102 3 health evaluation committee, shall coordinate implementation  
102 4 of this chapter including but not limited to the voluntary  
102 5 accreditation of designated local public health agencies and  
102 6 the department in accordance with the Iowa public health  
102 7 standards. Such implementation shall include evaluation of  
102 8 and quality improvement measures for the governmental public  
102 9 health system.

102 10 Sec. 111. NEW SECTION. 135A.4 GOVERNMENTAL PUBLIC HEALTH  
102 11 ADVISORY COUNCIL.

CODE: Establishes the Governmental Public Health Advisory Council  
and provides for the Council's membership and responsibilities.

102 12 1. A governmental public health advisory council is  
102 13 established to advise the department and make policy  
102 14 recommendations to the director of the department concerning  
102 15 administration, implementation, and coordination of this  
102 16 chapter and to make recommendations to the department  
102 17 regarding the governmental public health system. The council  
102 18 shall meet at a minimum of quarterly. The council shall  
102 19 consist of no fewer than fifteen members and no greater than  
102 20 twenty=three members. The members shall be appointed by the  
102 21 director. The director may solicit and consider  
102 22 recommendations from professional organizations, associations,  
102 23 and academic institutions in making appointments to the  
102 24 council.

102 25 2. Council members shall not be members of the  
102 26 governmental public health evaluation committee.

102 27 3. Council members shall serve for a term of two years and  
102 28 may be reappointed for a maximum of three consecutive terms.  
102 29 Initial appointment shall be in staggered terms. Vacancies  
102 30 shall be filled for the remainder of the original appointment.

102 31 4. The membership of the council shall satisfy all of the  
102 32 following requirements:

102 33 a. One member who has expertise in injury prevention.

102 34 b. One member who has expertise in environmental health.

102 35 c. One member who has expertise in emergency preparedness.

103 1 d. One member who has expertise in health promotion and  
103 2 chronic disease prevention.

103 3 e. One member who has epidemiological expertise in



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103 4 communicable and infectious disease prevention and control.  
103 5 f. One member representing each of Iowa's six public  
103 6 health regions who is an employee of a designated local public  
103 7 health agency or member of a local board of health. Such  
103 8 members shall include a minimum of one local public health  
103 9 administrator and one physician member of a local board of  
103 10 health.  
103 11 g. Two members who are representatives of the department.  
103 12 h. The director of the state hygienic laboratory at the  
103 13 university of Iowa, or the director's designee.  
103 14 i. At least one representative from academic institutions  
103 15 which grant undergraduate and postgraduate degrees in public  
103 16 health or other related health field and are accredited by a  
103 17 nationally recognized accrediting agency as determined by the  
103 18 United States secretary of education. For purposes of this  
103 19 paragraph, "accredited" means a certification of the quality  
103 20 of an institution of higher education.  
103 21 j. Two members who serve on a county board of supervisors.  
103 22 k. Four nonvoting, ex officio members who shall consist of  
103 23 four members of the general assembly, two from the senate and  
103 24 two from the house of representatives, with not more than one  
103 25 member from each chamber being from the same political party.  
103 26 The two senators shall be designated one member each by the  
103 27 majority leader of the senate after consultation with the  
103 28 president and by the minority leader of the senate. The two  
103 29 representatives shall be designated one member each by the  
103 30 speaker of the house of representatives after consultation  
103 31 with the majority leader of the house of representatives and  
103 32 by the minority leader of the house of representatives.  
103 33 l. A member of the state board of health who shall be a  
103 34 nonvoting, ex officio member.  
103 35 5. The council may utilize other relevant public health  
104 1 expertise when necessary to carry out its roles and  
104 2 responsibilities.  
104 3 6. The council shall do all of the following:  
104 4 a. Advise the department and make policy recommendations  
104 5 to the director of the department concerning administration,  
104 6 implementation, and coordination of this chapter and the

104 7 governmental public health system.  
104 8 b. Propose to the director public health standards that  
104 9 should be utilized for voluntary accreditation of designated  
104 10 local public health agencies and the department that include  
104 11 but are not limited to the organizational capacity and public  
104 12 health service components described in section 135A.6,  
104 13 subsection 1, by October 1, 2009.  
104 14 c. Recommend to the department an accrediting entity and  
104 15 identify the roles and responsibilities for the oversight and  
104 16 implementation of the voluntary accreditation of designated  
104 17 local public health agencies and the department by January 2,  
104 18 2010. This shall include completion of a pilot accreditation  
104 19 process for one designated local public health agency and the  
104 20 department by July 1, 2011.  
104 21 d. Recommend to the director strategies to implement  
104 22 voluntary accreditation of designated local public health  
104 23 agencies and the department effective January 2, 2012.  
104 24 e. Periodically review and make recommendations to the  
104 25 department regarding revisions to the public health standards  
104 26 pursuant to paragraph "b", as needed and based on reports  
104 27 prepared by the governmental public health evaluation  
104 28 committee pursuant to section 135A.5.  
104 29 f. Review rules developed and adopted by the state board  
104 30 of health under this chapter and make recommendations to the  
104 31 department for revisions to further promote implementation of  
104 32 this chapter and modernization of the governmental public  
104 33 health system.  
104 34 g. Form and utilize subcommittees as necessary to carry  
104 35 out the duties of the council.

105 1 Sec. 112. NEW SECTION . 135A.5 GOVERNMENTAL PUBLIC HEALTH  
105 2 EVALUATION COMMITTEE.  
105 3 1. A governmental public health evaluation committee is  
105 4 established to develop, implement, and evaluate the  
105 5 governmental public health system and voluntary accreditation  
105 6 program. The committee shall meet at least quarterly. The  
105 7 committee shall consist of no fewer than eleven members and no

CODE: Establishes the Governmental Public Health Evaluation Committee and provides for the Committee's membership and responsibilities.

105 8 greater than thirteen members. The members shall be appointed  
105 9 by the director of the department. The director may solicit  
105 10 and consider recommendations from professional organizations,  
105 11 associations, and academic institutions in making appointments  
105 12 to the committee.

105 13 2. Committee members shall not be members of the  
105 14 governmental public health advisory council.

105 15 3. Committee members shall serve for a term of two years  
105 16 and may be reappointed for a maximum of three consecutive  
105 17 terms. Initial appointment shall be in staggered terms.  
105 18 Vacancies shall be filled for the remainder of the original  
105 19 appointment.

105 20 4. The membership of the committee shall satisfy all of  
105 21 the following requirements:

105 22 a. At least one member representing each of Iowa's six  
105 23 public health regions. Each representative shall be an  
105 24 employee or administrator of a designated local public health  
105 25 agency or a member of a local board of health. Such members  
105 26 shall be appointed to ensure expertise in the areas of  
105 27 communicable and infectious diseases, environmental health,  
105 28 injury prevention, healthy behaviors, and emergency  
105 29 preparedness.

105 30 b. Two members who are representatives of the department.

105 31 c. A representative of the state hygienic laboratory at  
105 32 the university of Iowa.

105 33 d. At least two representatives from academic institutions  
105 34 which grant undergraduate and postgraduate degrees in public  
105 35 health or other health-related fields.

106 1 e. At least one economist who has demonstrated experience  
106 2 in public health, health care, or a health-related field.

106 3 f. At least one research analyst.

106 4 5. The committee may utilize other relevant public health  
106 5 expertise when necessary to carry out its roles and  
106 6 responsibilities.

106 7 6. The committee shall do all of the following:

106 8 a. Develop and implement processes for evaluation of the  
106 9 governmental public health system and the voluntary  
106 10 accreditation program.

106 11 b. Collect and report baseline information for  
106 12 organizational capacity and public health service delivery  
106 13 based on the Iowa public health standards prior to  
106 14 implementation of the voluntary accreditation program on  
106 15 January 2, 2012.  
106 16 c. Evaluate the effectiveness of the accrediting entity  
106 17 and the voluntary accreditation process.  
106 18 d. Evaluate the appropriateness of the Iowa public health  
106 19 standards and develop measures to determine reliability and  
106 20 validity.  
106 21 e. Determine what process and outcome improvements in the  
106 22 governmental public health system are attributable to  
106 23 voluntary accreditation.  
106 24 f. Assure that the evaluation process is capturing data to  
106 25 support key research in public health system effectiveness and  
106 26 health outcomes.  
106 27 g. Annually submit a report to the department by July 1.  
106 28 h. Form and utilize subcommittees as necessary to carry  
106 29 out the duties of the committee.

106 30 Sec. 113. NEW SECTION . 135A.6 GOVERNMENTAL PUBLIC HEALTH  
106 31 SYSTEM.

106 32 1. The governmental public health system, in accordance  
106 33 with the Iowa public health standards, shall include but not  
106 34 be limited to the following organizational capacity components  
106 35 and public health service components:

107 1 a. Organizational capacity components shall include all of  
107 2 the following:  
107 3 (1) Governance.  
107 4 (2) Administration.  
107 5 (3) Communication and information technology.  
107 6 (4) Workforce.  
107 7 (5) Community assessment and planning. This component  
107 8 consists of collaborative data collection and analysis for the  
107 9 completion of population-based community health assessments  
107 10 and community health profiles and the process of developing  
107 11 improvement plans to address the community health needs and

CODE: Provides for the components and entities included in the  
Governmental Public Health System.

107 12 identified gaps in public health services.  
107 13 (6) Evaluation.  
107 14 b. Public health service components shall include all of  
107 15 the following:  
107 16 (1) Prevention of epidemics and the spread of disease.  
107 17 This component includes the surveillance, detection,  
107 18 investigation, and prevention and control measures that  
107 19 prevent, reduce, or eliminate the spread of infectious  
107 20 disease.  
107 21 (2) Protection against environmental hazards. This  
107 22 component includes activities that reduce or eliminate the  
107 23 risk factors detrimental to the public's health within the  
107 24 natural or man-made environment.  
107 25 (3) Prevention of injuries. This component includes  
107 26 activities that facilitate the prevention, reduction, or  
107 27 elimination of intentional and unintentional injuries.  
107 28 (4) Promotion of healthy behaviors. This component  
107 29 includes activities to assure services that promote healthy  
107 30 behaviors to prevent chronic disease and reduce illness.  
107 31 (5) Preparation for, response to, and recovery from public  
107 32 health emergencies. This component includes activities to  
107 33 prepare the public health system and community partners to  
107 34 respond to public health threats, emergencies, and disasters  
107 35 and to assist in the recovery process.  
108 1 2. The governmental public health system shall include but  
108 2 not be limited to the following entities:  
108 3 a. Local boards of health.  
108 4 b. State board of health.  
108 5 c. Designated local public health agencies.  
108 6 d. The department.

108 7 Sec. 114. NEW SECTION. 135A.7 GOVERNMENTAL PUBLIC HEALTH  
108 8 SYSTEM AND ACCREDITATION DATA COLLECTION SYSTEM.  
108 9 1. The department shall establish and maintain a  
108 10 governmental public health system and an accreditation data  
108 11 collection system by which the state board of health, the  
108 12 director, the department, the council, and the committee may

CODE: Implements the Governmental Public Health System and Accreditation Data Collection System to facilitate communication between State and local entities.

108 13 monitor the implementation and effectiveness of the  
108 14 governmental public health system based on the Iowa public  
108 15 health standards.

108 16 2. Notwithstanding section 22.7 or any other provision of  
108 17 law, local boards of health shall provide to the department  
108 18 and the accrediting entity upon request all data and  
108 19 information necessary to determine the local board's capacity  
108 20 to comply with the Iowa public health standards, including but  
108 21 not limited to data and information regarding governance,  
108 22 administration, communication and information technology,  
108 23 workforce, personnel, staffing, budget, contracts, and other  
108 24 program and agency information.

108 25 3. The department may share any data or information  
108 26 collected pursuant to this section with the council or the  
108 27 committee as necessary to perform the duties of the council  
108 28 and committee. Data and information provided to the  
108 29 department under this section which are confidential pursuant  
108 30 to section 22.7, subsection 2, 11, or 50, section 139A.3, or  
108 31 other provision of law, remain confidential and shall not be  
108 32 released by the department, the council, or the committee.

108 33 4. During the pendency of the accreditation process, all  
108 34 accreditation files and reports prepared for or maintained by  
108 35 the accrediting entity are confidential and are not subject to  
109 1 discovery, subpoena, or other means of legal compulsion for  
109 2 their release. After the accrediting entity has issued its  
109 3 recommendation or report only the preliminary drafts of the  
109 4 recommendation or report, and records otherwise confidential  
109 5 pursuant to chapter 22 or other provision of state or federal  
109 6 law, shall remain confidential and are not subject to  
109 7 discovery, subpoena, or other means of legal compulsion for  
109 8 their release.

109 9 5. To the extent possible, activities under this section  
109 10 shall be coordinated with other health data collection systems  
109 11 including those maintained by the department.

109 12 Sec. 115. NEW SECTION . 135A.8 GOVERNMENTAL PUBLIC HEALTH  
109 13 SYSTEM FUND.

CODE: Establishes the Governmental Public Health System Fund in  
the State Treasury under the control of the Department of Public

109 14 1. The department is responsible for the funding of the  
109 15 administrative costs for implementation of this chapter. A  
109 16 governmental public health system fund is created as a  
109 17 separate fund in the state treasury under the control of the  
109 18 department. The fund shall consist of moneys obtained from  
109 19 any source, including the federal government, unless otherwise  
109 20 prohibited by law or the entity providing the funding. Moneys  
109 21 deposited in the fund are appropriated to the department for  
109 22 the public health purposes specified in this chapter. Moneys  
109 23 in the fund shall not be transferred, used, obligated,  
109 24 appropriated, or otherwise encumbered except as provided in  
109 25 this section. Notwithstanding section 8.33, moneys in the  
109 26 governmental public health system fund at the end of the  
109 27 fiscal year shall not revert to any other fund but shall  
109 28 remain in the fund for subsequent fiscal years.

109 29 2. The fund is established to assist local boards of  
109 30 health and the department with the provision of governmental  
109 31 public health system organizational capacity and public health  
109 32 service delivery and to achieve and maintain voluntary  
109 33 accreditation in accordance with the Iowa public health  
109 34 standards. At least seventy percent of the funds shall be  
109 35 made available to local boards of health and up to thirty  
110 1 percent of the funds may be utilized by the department.

110 2 3. Moneys in the fund may be allocated by the department  
110 3 to a local board of health for organizational capacity and  
110 4 service delivery. Such allocation may be made on a matching,  
110 5 dollar=for=dollar basis for the acquisition of equipment, or  
110 6 by providing grants to achieve and maintain voluntary  
110 7 accreditation in accordance with the Iowa public health  
110 8 standards.

110 9 4. A local board of health seeking matching funds or  
110 10 grants under this section shall apply to the department. The  
110 11 state board of health shall adopt rules concerning the  
110 12 application and award process for the allocation of moneys in  
110 13 the fund and shall establish the criteria for the allocation  
110 14 of moneys in the fund if the moneys are insufficient to meet  
110 15 the needs of local boards of health.

Health. Funds deposited in the Fund are used to implement the  
Public Health Modernization Act.

110 16 Sec. 116. NEW SECTION . 135A.9 RULES.  
110 17 The state board of health shall adopt rules pursuant to  
110 18 chapter 17A to implement this chapter which shall include but  
110 19 are not limited to the following:  
110 20 1. Incorporation of the Iowa public health standards  
110 21 recommended to the department pursuant to section 135A.5,  
110 22 subsection 6.  
110 23 2. A voluntary accreditation process to begin no later  
110 24 than January 2, 2012, for designated local public health  
110 25 agencies and the department.  
110 26 3. Rules relating to the operation of the governmental  
110 27 public health advisory council.  
110 28 4. Rules relating to the operation of the governmental  
110 29 public health system evaluation committee.  
110 30 5. The application and award process for governmental  
110 31 public health system fund moneys.  
110 32 6. Rules relating to data collection for the governmental  
110 33 public health system and the voluntary accreditation program.  
110 34 7. Rules otherwise necessary to implement the chapter.

CODE: Designates the State Board of Health as the entity to create administrative rules to implement the Public Health Modernization Act.

110 35 Sec. 117. NEW SECTION . 135A.10 PROHIBITED ACTS ==  
111 1 FRAUDULENTLY CLAIMING ACCREDITATION == CIVIL PENALTY.  
111 2 A local board of health or local public health agency that  
111 3 imparts or conveys, or causes to be imparted or conveyed,  
111 4 information claiming that it is accredited pursuant to this  
111 5 chapter or that uses any other term to indicate or imply it is  
111 6 accredited without being accredited under this chapter is  
111 7 subject to a civil penalty not to exceed one thousand dollars  
111 8 per day for each offense. However, nothing in this chapter  
111 9 shall be construed to restrict a local board of health or  
111 10 local public health agency from providing any services for  
111 11 which it is duly authorized.

CODE: Establishes a civil penalty if a local board of health or local public health agency fraudulently claims to be accredited.

111 12 Sec. 118. NEW SECTION . 135A.11 IMPLEMENTATION.  
111 13 The department shall implement this chapter only to the  
111 14 extent that funding is available.

CODE: The Department of Public Health may only implement the Public Health Modernization Act as funding becomes available.



DETAIL: An amount of \$161,349 is appropriated to the Governmental Public Health System Fund in this Bill for FY 2010.

111 15 Sec. 119. EFFECTIVE DATE. This division of this Act,  
111 16 being deemed of immediate importance, takes effect upon  
111 17 enactment.

Division XI is effective on enactment.

111 18 DIVISION XII  
111 19 MISCELLANEOUS STATUTORY CHANGES

111 20 Sec. 120. Section 234.12A, subsection 1, Code 2009, is  
111 21 amended to read as follows:

CODE: Eliminates the \$0.07 fee paid to retailers for the Supplemental Nutrition Assistance Program.

111 22 1. The department of human services shall maintain an  
111 23 electronic benefits transfer program utilizing electronic  
111 24 funds transfer systems for the food assistance program. The  
111 25 electronic benefits transfer program implemented under this  
111 26 section ~~shall at a minimum provide for all of the following:~~  
111 27 ~~a. A retailer shall not be required~~ require a retailer to  
111 28 make cash disbursements or to provide, purchase, or upgrade  
111 29 electronic funds transfer system equipment as a condition of  
111 30 participation in the program.

DETAIL: This is estimated to save the State \$690,726 in FY 2010.

111 31 ~~b. A retailer providing electronic funds transfer system~~  
111 32 ~~equipment for transactions pursuant to the program shall be~~  
111 33 ~~reimbursed seven cents for each approved transaction pursuant~~  
111 34 ~~to the program utilizing the retailer's equipment.~~  
111 35 ~~c. A retailer that provides electronic funds transfer~~  
112 1 ~~system equipment for transactions pursuant to the program and~~  
112 2 ~~who makes cash disbursements pursuant to the program utilizing~~  
112 3 ~~the retailer's equipment shall be paid a fee of seven cents by~~  
112 4 ~~the department for each cash disbursement transaction by the~~  
112 5 ~~retailer.~~

112 6 Sec. 121. Section 237B.1, subsection 3, Code 2009, is  
112 7 amended to read as follows:  
112 8 3. In establishing the initial and subsequent standards,

CODE: Requires the DHS to apply criminal and abuse registry background check requirements for owners and operators of children centers. Includes staff and other persons that may have contact with

112 9 the department of human services shall review other  
 112 10 certification and licensing standards applicable to the  
 112 11 centers. The standards established by the department shall be  
 112 12 broad facility standards for the protection of children's  
 112 13 safety. The department shall also apply criminal and abuse  
 112 14 registry background check requirements for the persons who  
 112 15 own, operate, staff, participate in, or otherwise have contact  
 112 16 with the children receiving services from a children's center.  
 112 17 The background check requirements shall be substantially  
 112 18 equivalent to those applied under chapter 237 for a child  
 112 19 foster care facility provider. The department of human  
 112 20 services shall not establish program standards or other  
 112 21 requirements under this section involving program development  
 112 22 or oversight of the programs provided to the children served  
 112 23 by children's centers.

the children. Requires the background check requirements to be substantially equivalent to those of a child foster care facility provider.

112 24 Sec. 122. Section 249A.3, subsection 14, Code 2009, is  
 112 25 amended to read as follows:  
 112 26 14. Once initial ~~ongoing~~ eligibility for ~~the family~~  
 112 27 ~~medical assistance program=related medical assistance~~ is  
 112 28 determined for a child ~~described under subsection 1, paragraph~~  
 112 29 ~~"b", "f", "g", "j", "k", "l", or "n" or under subsection 2,~~  
 112 30 ~~paragraph "e", "f", or "h"~~ the age of nineteen, the department  
 112 31 shall provide continuous eligibility for a period of up to  
 112 32 twelve months regardless of changes in family circumstances,  
 112 33 until the child's next annual review of eligibility under the  
 112 34 medical assistance program, ~~if the child would otherwise be~~  
 112 35 ~~determined ineligible due to excess countable income but~~  
 113 1 ~~otherwise remains eligible~~ with the exception of the following  
 113 2 children:  
 113 3 a. A newborn child of a medical assistance=eligible woman.  
 113 4 b. A child whose eligibility was determined under the  
 113 5 medically needy program.  
 113 6 c. A child who is eligible under a state=only funded  
 113 7 program.  
 113 8 d. A child who is no longer an Iowa resident.  
 113 9 e. A child who is incarcerated in a jail or other

CODE: Makes federally required changes to continuous eligibility provisions for Medicaid children to the Code of Iowa.

113 10 correctional institution.

113 11 Sec. 123. EFFECTIVE DATE == RETROACTIVE APPLICABILITY.  
113 12 The section of this division of this Act amending section  
113 13 249A.3, subsection 14, being deemed of immediate importance,  
113 14 takes effect upon enactment and is retroactively applicable to  
113 15 July 1, 2008.

This Section of the Division relating to Medicaid continuous eligibility is effective on enactment and retroactive to July 1, 2008.

113 16 Sec. 124. CODE EDITOR DIRECTIVE == INTENT.  
113 17 1. References in this Act to the department of elder  
113 18 affairs mean the department on aging in accordance with 2009  
113 19 Iowa Acts, Senate File 204, as enacted, unless a contrary  
113 20 intent is clearly evident.  
113 21 2. The Iowa Code editor is directed to make conforming  
113 22 changes, as appropriate, to codified provisions of this Act to  
113 23 reflect the provisions of 2009 Iowa Acts, Senate File 204, as  
113 24 enacted, including but not limited to replacing the words  
113 25 "department of elder affairs" with the words "department on  
113 26 aging".

Directs the Code Editor to change any references from the Department of Elder Affairs to the Department on Aging.

113 27 Sec. 125. Sections 237A.28 and 422.100, Code 2009, are  
113 28 repealed.

CODE: Repeals Sections relating to the elimination of the Child Care Tax Credit. Funding is provided in the child care subsidy appropriation.

113 29 HF 811  
113 30 pf/cm/25

## Summary Data

### General Fund

	Estimated Net FY 2009	Supp-House Action FY 2009	Supp-Senate Approp FY 2009	House Action FY 2010	Senate Approp FY 2010	Sen Approp FY 2010 vs Est Net FY 2009	Page and Line #
	(1)	(2)	(3)	(4)	(5)	(6)	(7)
Health and Human Services	\$ 1,224,577,120	\$ -52,000,000	\$ -52,000,000	\$ 1,249,658,725	\$ 1,249,658,725	\$ 25,081,605	
<b>Grand Total</b>	<u><u>\$ 1,224,577,120</u></u>	<u><u>\$ -52,000,000</u></u>	<u><u>\$ -52,000,000</u></u>	<u><u>\$ 1,249,658,725</u></u>	<u><u>\$ 1,249,658,725</u></u>	<u><u>\$ 25,081,605</u></u>	

# Health and Human Services

## General Fund

	Estimated Net FY 2009	Supp-House Action FY 2009	Supp-Senate Approp FY 2009	House Action FY 2010	Senate Approp FY 2010	Sen Approp FY 2010 vs Est Net FY 2009	Page and Line #
	(1)	(2)	(3)	(4)	(5)	(6)	(7)
<b><u>Elder Affairs, Dept. of</u></b>							
<b>Elder Affairs, Dept. of</b>							
Aging Programs	\$ 5,274,444	\$ 0	\$ 0	\$ 4,958,230	\$ 4,958,230	\$ -316,214	PG 1 LN 10
<b>Total Elder Affairs, Dept. of</b>	<u>\$ 5,274,444</u>	<u>\$ 0</u>	<u>\$ 0</u>	<u>\$ 4,958,230</u>	<u>\$ 4,958,230</u>	<u>\$ -316,214</u>	
<b><u>Public Health, Dept. of</u></b>							
<b>Public Health, Dept. of</b>							
Addictive Disorders	\$ 3,035,917	\$ 0	\$ 0	\$ 28,652,500	\$ 28,652,500	\$ 25,616,583	PG 3 LN 27
Healthy Children and Families	2,584,835	0	0	2,249,167	2,249,167	-335,668	PG 6 LN 20
Chronic Conditions	2,162,652	0	0	2,756,236	2,756,236	593,584	PG 7 LN 14
Community Capacity	1,694,329	0	0	4,116,847	4,116,847	2,422,518	PG 8 LN 6
Elderly Wellness	9,095,475	0	0	8,345,779	8,345,779	-749,696	PG 9 LN 3
Environmental Hazards	721,737	0	0	1,000,391	1,000,391	278,654	PG 9 LN 12
Infectious Diseases	2,795,546	0	0	1,630,661	1,630,661	-1,164,885	PG 9 LN 23
Public Protection	3,115,215	0	0	3,569,986	3,569,986	454,771	PG 9 LN 29
Resource Management	1,194,098	0	0	1,062,517	1,062,517	-131,581	PG 10 LN 20
Prevention and Chronic Care Management	192,093	0	0	0	0	-192,093	
Medical Home System	166,790	0	0	0	0	-166,790	
Healthy Communities Initiative	892,941	0	0	0	0	-892,941	
Gov. Council on Physical Fitness and Nutrition	110,418	0	0	0	0	-110,418	
Iowa Health Information Technology System	191,995	0	0	0	0	-191,995	
Health Care Access	175,555	0	0	0	0	-175,555	
<b>Total Public Health, Dept. of</b>	<u>\$ 28,129,596</u>	<u>\$ 0</u>	<u>\$ 0</u>	<u>\$ 53,384,084</u>	<u>\$ 53,384,084</u>	<u>\$ 25,254,488</u>	
<b><u>Human Services, Dept. of</u></b>							
<b>General Administration</b>							
General Administration	\$ 16,848,360	\$ 0	\$ 0	\$ 15,252,523	\$ 15,252,523	\$ -1,595,837	PG 48 LN 18
<b>Field Operations</b>							
Child Support Recoveries	\$ 15,082,461	\$ 0	\$ 0	\$ 13,420,460	\$ 13,420,460	\$ -1,662,001	PG 20 LN 4
Field Operations	69,234,591	0	0	63,032,831	63,032,831	-6,201,760	PG 48 LN 5
<b>Total Field Operations</b>	<u>\$ 84,317,052</u>	<u>\$ 0</u>	<u>\$ 0</u>	<u>\$ 76,453,291</u>	<u>\$ 76,453,291</u>	<u>\$ -7,863,761</u>	
<b>Toledo Juvenile Home</b>							
Toledo Juvenile Home	\$ 7,591,274	\$ 0	\$ 0	\$ 6,754,759	\$ 6,754,759	\$ -836,515	PG 32 LN 22

# Health and Human Services

## General Fund

	Estimated Net FY 2009	Supp-House Action FY 2009	Supp-Senate Approp FY 2009	House Action FY 2010	Senate Approp FY 2010	Sen Approp FY 2010 vs Est Net FY 2009	Page and Line #
	(1)	(2)	(3)	(4)	(5)	(6)	(7)
<b>Eldora Training School</b>							
Eldora Training School	\$ 12,045,087	\$ 0	\$ 0	\$ 10,717,787	\$ 10,717,787	\$ -1,327,300	PG 32 LN 27
<b>Cherokee CCUSO</b>							
Civil Commit. Unit for Sex Offenders	\$ 6,701,758	\$ 0	\$ 0	\$ 6,860,204	\$ 6,860,204	\$ 158,446	PG 47 LN 17
<b>Cherokee</b>							
Cherokee MHI	\$ 6,109,285	\$ 0	\$ 0	\$ 5,436,076	\$ 5,436,076	\$ -673,209	PG 41 LN 31
<b>Clarinda</b>							
Clarinda MHI	\$ 7,298,531	\$ 0	\$ 0	\$ 6,227,335	\$ 6,227,335	\$ -1,071,196	PG 42 LN 8
<b>Independence</b>							
Independence MHI	\$ 10,693,858	\$ 0	\$ 0	\$ 9,503,567	\$ 9,503,567	\$ -1,190,291	PG 42 LN 14
<b>Mt Pleasant</b>							
Mt Pleasant MHI	\$ 2,023,008	\$ 0	\$ 0	\$ 1,795,552	\$ 1,795,552	\$ -227,456	PG 42 LN 20
<b>Glenwood</b>							
Glenwood Resource Center	\$ 18,903,764	\$ 0	\$ 0	\$ 17,620,487	\$ 17,620,487	\$ -1,283,277	PG 43 LN 16
<b>Woodward</b>							
Woodward Resource Center	\$ 12,561,726	\$ 0	\$ 0	\$ 10,929,200	\$ 10,929,200	\$ -1,632,526	PG 43 LN 19

# Health and Human Services

## General Fund

	Estimated Net FY 2009	Supp-House Action FY 2009	Supp-Senate Approp FY 2009	House Action FY 2010	Senate Approp FY 2010	Sen Approp FY 2010 vs Est Net FY 2009	Page and Line #
	(1)	(2)	(3)	(4)	(5)	(6)	(7)
<b>Assistance</b>							
Family Investment Program/JOBS	\$ 42,060,901	\$ 0	\$ 0	\$ 34,342,700	\$ 34,342,700	\$ -7,718,201	PG 18 LN 8
Medical Assistance	645,302,330	-52,000,000	-52,000,000	678,038,847	678,038,847	32,736,517	PG 21 LN 12
Health Insurance Premium Payment	570,924	0	0	508,011	508,011	-62,913	PG 27 LN 23
Medical Contracts	13,953,067	0	0	13,651,503	13,651,503	-301,564	PG 27 LN 35
State Children's Health Ins. (hawk-i)	13,660,852	0	0	14,629,830	14,629,830	968,978	PG 29 LN 7
State Supplementary Assistance	18,332,214	0	0	18,412,646	18,412,646	80,432	PG 28 LN 10
Child Care Assistance	40,483,732	0	0	37,799,472	37,799,472	-2,684,260	PG 29 LN 23
Child and Family Services	88,971,729	0	0	90,591,451	90,591,451	1,619,722	PG 33 LN 2
Adoption Subsidy	33,656,339	0	0	34,883,674	34,883,674	1,227,335	PG 39 LN 23
Family Support Subsidy	1,907,312	0	0	1,697,137	1,697,137	-210,175	PG 41 LN 7
Connors Training	41,984	0	0	37,358	37,358	-4,626	PG 41 LN 21
MI/MR/DD State Cases	13,067,178	0	0	11,446,288	11,446,288	-1,620,890	PG 44 LN 28
MH/DD Community Services	18,017,890	0	0	15,790,111	15,790,111	-2,227,779	PG 45 LN 29
MH/DD Growth Factor	54,081,310	0	0	54,108,770	54,108,770	27,460	PG 71 LN 10
Volunteers	105,717	0	0	94,067	94,067	-11,650	PG 49 LN 16
Medical Assistance, Hawk-i, Hawk-i Expansion	4,728,000	0	0	4,207,001	4,207,001	-520,999	PG 88 LN 9
Family Planning	738,750	0	0	10,000	10,000	-728,750	PG 49 LN 23
Pregnancy Counseling	197,000	0	0	100,000	100,000	-97,000	PG 50 LN 3
<b>Total Assistance</b>	<b>\$ 989,877,229</b>	<b>\$ -52,000,000</b>	<b>\$ -52,000,000</b>	<b>\$ 1,010,348,866</b>	<b>\$ 1,010,348,866</b>	<b>\$ 20,471,637</b>	
<b>Total Human Services, Dept. of</b>	<b>\$ 1,174,970,932</b>	<b>\$ -52,000,000</b>	<b>\$ -52,000,000</b>	<b>\$ 1,177,899,647</b>	<b>\$ 1,177,899,647</b>	<b>\$ 2,928,715</b>	
<b><u>Veterans Affairs, Dept. of</u></b>							
<b>Veterans Affairs, Dept. of</b>							
General Administration	\$ 1,199,329	\$ 0	\$ 0	\$ 1,067,170	\$ 1,067,170	\$ -132,159	PG 11 LN 3
Iowa Veterans Home	14,391,435	0	0	11,326,650	11,326,650	-3,064,785	PG 11 LN 10
Veterans County Grants	585,599	0	0	1,000,000	1,000,000	414,401	PG 11 LN 34
War Orphans Educational Assistance	25,785	0	0	22,944	22,944	-2,841	
<b>Total Veterans Affairs, Dept. of</b>	<b>\$ 16,202,148</b>	<b>\$ 0</b>	<b>\$ 0</b>	<b>\$ 13,416,764</b>	<b>\$ 13,416,764</b>	<b>\$ -2,785,384</b>	
<b>Total Health and Human Services</b>	<b>\$ 1,224,577,120</b>	<b>\$ -52,000,000</b>	<b>\$ -52,000,000</b>	<b>\$ 1,249,658,725</b>	<b>\$ 1,249,658,725</b>	<b>\$ 25,081,605</b>	

## Summary Data

### Other Funds

	Estimated Net FY 2009	Supp-House Action FY 2009	Supp-Senate Approp FY 2009	House Action FY 2010	Senate Approp FY 2010	Sen Approp FY 2010 vs Est Net FY 2009	Page and Line #
	(1)	(2)	(3)	(4)	(5)	(6)	(7)
Health and Human Services	\$ 551,122,941	\$ 0	\$ 0	\$ 414,797,569	\$ 414,797,569	\$ -136,325,372	
<b>Grand Total</b>	<u><u>\$ 551,122,941</u></u>	<u><u>\$ 0</u></u>	<u><u>\$ 0</u></u>	<u><u>\$ 414,797,569</u></u>	<u><u>\$ 414,797,569</u></u>	<u><u>\$ -136,325,372</u></u>	



# Health and Human Services

## Other Funds

	Estimated Net FY 2009	Supp-House Action FY 2009	Supp-Senate Approp FY 2009	House Action FY 2010	Senate Approp FY 2010	Sen Approp FY 2010 vs Est Net FY 2009	Page and Line #
	(1)	(2)	(3)	(4)	(5)	(6)	(7)
<b><u>Elder Affairs, Dept. of</u></b>							
<b>Elder Affairs, Dept. of</b>							
Elder Affairs Operations-SLTF	\$ 8,486,698	\$ 0	\$ 0	\$ 8,486,698	\$ 8,486,698	\$ 0	PG 62 LN 16
<b>Total Elder Affairs, Dept. of</b>	<b>\$ 8,486,698</b>	<b>\$ 0</b>	<b>\$ 0</b>	<b>\$ 8,486,698</b>	<b>\$ 8,486,698</b>	<b>\$ 0</b>	
<b><u>Public Health, Dept. of</u></b>							
<b>Public Health, Dept. of</b>							
Ad. Dis.-Substance Abuse Treatment-GTF	\$ 2,215,000	\$ 0	\$ 0	\$ 0	\$ 0	\$ -2,215,000	
Ad. Dis.-Gambling Treatment Prog.-GTF	5,068,101	0	0	0	0	-5,068,101	
Ad. Dis.-Tobacco Use Prev.-HITT	6,928,265	0	0	0	0	-6,928,265	
Ad. Dis.-Sub. Abuse Treatment-HITT	13,800,000	0	0	0	0	-13,800,000	
Ad. Dis.-Sub. Abuse Prev. for Kids-HITT	1,050,000	0	0	0	0	-1,050,000	
Chr. Con-PKU Assistance-HITT	100,000	0	0	0	0	-100,000	
Chr. Con.-Iowa Stillbirth Eval.-HITT	26,000	0	0	0	0	-26,000	
Chr. Con.-AIDS Drug Assist. Prog.-HITT	275,000	0	0	0	0	-275,000	
Healthy Iowans 2010-HITT	2,509,960	0	0	0	0	-2,509,960	
Epilepsy Education-HITT	100,000	0	0	0	0	-100,000	
Addictive Disorders-HCTF	3,195,164	0	0	2,748,692	2,748,692	-446,472	PG 76 LN 24
Healthy Children and Families-HCTF	667,700	0	0	493,574	493,574	-174,126	PG 77 LN 22
Chronic Conditions-HCTF	1,164,181	0	0	891,219	891,219	-272,962	PG 78 LN 9
Community Capacity-HCTF	2,790,000	0	0	2,253,507	2,253,507	-536,493	PG 78 LN 23
<b>Total Public Health, Dept. of</b>	<b>\$ 39,889,371</b>	<b>\$ 0</b>	<b>\$ 0</b>	<b>\$ 6,386,992</b>	<b>\$ 6,386,992</b>	<b>\$ -33,502,379</b>	
<b><u>Elder Affairs, Dept. of</u></b>							
<b>Elder Affairs, Dept. of</b>							
Case Management Systems - HCTA	\$ 0	\$ 0	\$ 0	\$ 200,000	\$ 200,000	\$ 200,000	PG 70 LN 6
<b>Total Elder Affairs, Dept. of</b>	<b>\$ 0</b>	<b>\$ 0</b>	<b>\$ 0</b>	<b>\$ 200,000</b>	<b>\$ 200,000</b>	<b>\$ 200,000</b>	

# Health and Human Services

## Other Funds

	Estimated Net FY 2009	Supp-House Action FY 2009	Supp-Senate Approp FY 2009	House Action FY 2010	Senate Approp FY 2010	Sen Approp FY 2010 vs Est Net FY 2009	Page and Line #
	(1)	(2)	(3)	(4)	(5)	(6)	(7)
<b>Human Services, Dept. of</b>							
<b>General Administration</b>							
FIP-TANF	\$ 26,101,513	\$ 0	\$ 0	\$ 26,106,513	\$ 26,106,513	\$ 5,000	PG 12 LN 28
Promise Jobs-TANF	13,334,528	0	0	13,084,528	13,084,528	-250,000	PG 12 LN 32
FaDDS-TANF	2,998,675	0	0	2,998,675	2,998,675	0	PG 13 LN 12
Field Operations-TANF	18,507,495	0	0	18,507,495	18,507,495	0	PG 13 LN 23
General Administration-TANF	3,744,000	0	0	3,744,000	3,744,000	0	PG 13 LN 25
Local Admin. Cost-TANF	2,189,830	0	0	2,189,830	2,189,830	0	PG 13 LN 27
State Day Care-TANF	18,986,177	0	0	18,986,177	18,986,177	0	PG 13 LN 29
MH/DD Comm. Services-TANF	4,894,052	0	0	4,894,052	4,894,052	0	PG 14 LN 15
Child & Family Services-TANF	32,084,430	0	0	32,084,430	32,084,430	0	PG 14 LN 18
Child Abuse Prevention-TANF	250,000	0	0	250,000	250,000	0	PG 14 LN 20
Training & Technology-TANF	1,037,186	0	0	1,037,186	1,037,186	0	PG 15 LN 5
HOPES - Transfer to DPH-TANF	200,000	0	0	200,000	200,000	0	PG 15 LN 9
0-5 Children-TANF	7,350,000	0	0	7,350,000	7,350,000	0	PG 15 LN 13
Child Support Recovery-TANF	200,000	0	0	0	0	-200,000	
Child Care Direct Assistance-TANF	8,900,000	0	0	9,345,000	9,345,000	445,000	
<b>Total General Administration</b>	<b>\$ 140,777,886</b>	<b>\$ 0</b>	<b>\$ 0</b>	<b>\$ 140,777,886</b>	<b>\$ 140,777,886</b>	<b>\$ 0</b>	

# Health and Human Services

## Other Funds

	Estimated Net FY 2009	Supp-House Action FY 2009	Supp-Senate Approp FY 2009	House Action FY 2010	Senate Approp FY 2010	Sen Approp FY 2010 vs Est Net FY 2009	Page and Line #
	(1)	(2)	(3)	(4)	(5)	(6)	(7)
<b>Assistance</b>							
Pregnancy Prevention-TANF	\$ 1,930,067	\$ 0	\$ 0	\$ 1,930,067	\$ 1,930,067	\$ 0	PG 14 LN 22
Medical Supplemental-SLTF	111,753,195	0	0	16,784,483	16,784,483	-94,968,712	PG 64 LN 31
Medical Contracts-Pharm. Settlement	1,323,833	0	0	1,323,833	1,323,833	0	PG 65 LN 10
Broadlawns Hospital-ICA	40,000,000	0	0	46,000,000	46,000,000	6,000,000	PG 67 LN 13
State Hospital-Cherokee-ICA	3,164,766	0	0	0	0	-3,164,766	
State Hospital-Clarinda-ICA	687,779	0	0	0	0	-687,779	
State Hospital-Independence-ICA	3,146,494	0	0	0	0	-3,146,494	
State Hospital-Mt Pleasant-ICA	2,000,961	0	0	0	0	-2,000,961	
Medical Examinations-HCTA	556,800	0	0	556,800	556,800	0	PG 68 LN 32
Medical Information Hotline-HCTA	150,000	0	0	100,000	100,000	-50,000	PG 69 LN 1
Health Partnership Activities-HCTA	900,000	0	0	600,000	600,000	-300,000	PG 69 LN 4
Audits, Perf. Eval., Studies-HCTA	400,000	0	0	125,000	125,000	-275,000	PG 69 LN 7
IowaCare Admin. Costs-HCTA	1,132,412	0	0	1,132,412	1,132,412	0	PG 69 LN 10
Dental Home for Children-HCTA	1,000,000	0	0	1,000,000	1,000,000	0	PG 69 LN 12
Mental Health Trans. Pilot-HCTA	250,000	0	0	0	0	-250,000	
MH/DD Workforce Development	500,000	0	0	50,000	50,000	-450,000	PG 69 LN 17
Medical Assistance-HCTF	114,943,296	0	0	111,409,156	111,409,156	-3,534,140	PG 81 LN 7
MH/MR/DD Growth-HCTF	7,592,099	0	0	0	0	-7,592,099	
General Administration-HITT	274,000	0	0	0	0	-274,000	
POS Provider Increase-HITT	146,750	0	0	0	0	-146,750	
Other Service Providers Inc.-HITT	182,381	0	0	0	0	-182,381	
Child and Family Services-HITT	3,786,677	0	0	0	0	-3,786,677	
Broadlawns Admin-HCTA	230,000	0	0	290,000	290,000	60,000	PG 69 LN 24
MH PTRF Medical Asst.	624,000	0	0	0	0	-624,000	
Medical Contracts - HCTA	0	0	0	1,300,000	1,300,000	1,300,000	PG 69 LN 22
<b>Total Assistance</b>	<b>\$ 296,675,510</b>	<b>\$ 0</b>	<b>\$ 0</b>	<b>\$ 182,601,751</b>	<b>\$ 182,601,751</b>	<b>\$ -114,073,759</b>	
<b>Total Human Services, Dept. of</b>	<b>\$ 437,453,396</b>	<b>\$ 0</b>	<b>\$ 0</b>	<b>\$ 323,379,637</b>	<b>\$ 323,379,637</b>	<b>\$ -114,073,759</b>	
<b>Regents, Board of</b>							
<b>Regents, Board of</b>							
BOR UIHC - IowaCares Expansion Population	\$ 35,969,365	\$ 0	\$ 0	\$ 47,020,131	\$ 47,020,131	\$ 11,050,766	PG 66 LN 26
BOR UIHC - IowaCares	27,284,584	0	0	27,284,584	27,284,584	0	PG 65 LN 20
<b>Total Regents, Board of</b>	<b>\$ 63,253,949</b>	<b>\$ 0</b>	<b>\$ 0</b>	<b>\$ 74,304,715</b>	<b>\$ 74,304,715</b>	<b>\$ 11,050,766</b>	

# Health and Human Services

## Other Funds

	Estimated Net FY 2009 (1)	Supp-House Action FY 2009 (2)	Supp-Senate Approp FY 2009 (3)	House Action FY 2010 (4)	Senate Approp FY 2010 (5)	Sen Approp FY 2010 vs Est Net FY 2009 (6)	Page and Line # (7)
<b><u>Inspections &amp; Appeals, Dept. of</u></b>							
<b>Inspections and Appeals, Dept. of</b>							
Assisted Living/Adult Day Care-SLTF	\$ 1,339,527	\$ 0	\$ 0	\$ 1,339,527	\$ 1,339,527	\$ 0	PG 64 LN 4
<b>Total Inspections &amp; Appeals, Dept. of</b>	<u>\$ 1,339,527</u>	<u>\$ 0</u>	<u>\$ 0</u>	<u>\$ 1,339,527</u>	<u>\$ 1,339,527</u>	<u>\$ 0</u>	
<b><u>Iowa Finance Authority</u></b>							
<b>Iowa Finance Authority</b>							
Rent Subsidy Program-SLTF	\$ 700,000	\$ 0	\$ 0	\$ 700,000	\$ 700,000	\$ 0	PG 64 LN 14
<b>Total Iowa Finance Authority</b>	<u>\$ 700,000</u>	<u>\$ 0</u>	<u>\$ 0</u>	<u>\$ 700,000</u>	<u>\$ 700,000</u>	<u>\$ 0</u>	
<b>Total Health and Human Services</b>	<u>\$ 551,122,941</u>	<u>\$ 0</u>	<u>\$ 0</u>	<u>\$ 414,797,569</u>	<u>\$ 414,797,569</u>	<u>\$ -136,325,372</u>	

## Summary Data

### FTE

	Estimated Net FY 2009	Supp-House Action FY 2009	Supp-Senate Approp FY 2009	House Action FY 2010	Senate Approp FY 2010	Sen Approp FY 2010 vs Est Net FY 2009	Page and Line #
	(1)	(2)	(3)	(4)	(5)	(6)	(7)
Health and Human Services	7,127.55	20.76	20.76	6,990.71	6,990.71	-136.84	
<b>Grand Total</b>	<u>7,127.55</u>	<u>20.76</u>	<u>20.76</u>	<u>6,990.71</u>	<u>6,990.71</u>	<u>-136.84</u>	

NOTE: The FTE positions in the Estimated Net FY 2009 column reflect the authorized FTE positions in the final legislative action of the FY 2009 appropriations Act.

# Health and Human Services

## FTE

	Estimated Net FY 2009	Supp-House Action FY 2009	Supp-Senate Approp FY 2009	House Action FY 2010	Senate Approp FY 2010	Sen Approp FY 2010 vs Est Net FY 2009	Page and Line #
	(1)	(2)	(3)	(4)	(5)	(6)	(7)
<b><u>Elder Affairs, Dept. of</u></b>							
<b>Elder Affairs, Dept. of</b>							
Aging Programs	40.50	0.00	0.00	37.50	37.50	-3.00	PG 1 LN 10
<b>Total Elder Affairs, Dept. of</b>	40.50	0.00	0.00	37.50	37.50	-3.00	
<b><u>Public Health, Dept. of</u></b>							
<b>Public Health, Dept. of</b>							
Addictive Disorders	6.00	0.00	0.00	18.00	18.00	12.00	PG 3 LN 27
Healthy Children and Families	16.00	0.00	0.00	14.00	14.00	-2.00	PG 6 LN 20
Chronic Conditions	5.00	0.00	0.00	3.00	3.00	-2.00	PG 7 LN 14
Community Capacity	12.00	0.00	0.00	21.00	21.00	9.00	PG 8 LN 6
Environmental Hazards	2.00	0.00	0.00	4.50	4.50	2.50	PG 9 LN 12
Infectious Diseases	7.00	0.00	0.00	5.00	5.00	-2.00	PG 9 LN 23
Public Protection	128.00	0.00	0.00	130.00	130.00	2.00	PG 9 LN 29
Resource Management	10.00	0.00	0.00	10.00	10.00	0.00	PG 10 LN 20
Ad. Dis.-Gambling Treatment Prog.-GTF	2.95	0.00	0.00	0.00	0.00	-2.95	
Ad. Dis.-Tobacco Use Prev.-HITT	7.00	0.00	0.00	0.00	0.00	-7.00	
Healthy Iowans 2010-HITT	4.00	0.00	0.00	0.00	0.00	-4.00	
Addictive Disorders-HCTF	5.00	0.00	0.00	0.00	0.00	-5.00	PG 76 LN 24
Healthy Children and Families-HCTF	1.00	0.00	0.00	0.00	0.00	-1.00	PG 77 LN 22
Chronic Conditions-HCTF	1.00	0.00	0.00	0.00	0.00	-1.00	PG 78 LN 9
Community Capacity-HCTF	6.00	0.00	0.00	0.00	0.00	-6.00	PG 78 LN 23
<b>Total Public Health, Dept. of</b>	212.95	0.00	0.00	205.50	205.50	-7.45	
<b><u>Human Services, Dept. of</u></b>							
<b>General Administration</b>							
General Administration	407.50	0.00	0.00	354.33	354.33	-53.17	PG 48 LN 18
<b>Field Operations</b>							
Child Support Recoveries	515.00	0.00	0.00	520.00	520.00	5.00	PG 20 LN 4
Field Operations	2,130.68	0.00	0.00	2,000.13	2,000.13	-130.55	PG 48 LN 5
<b>Total Field Operations</b>	2,645.68	0.00	0.00	2,520.13	2,520.13	-125.55	
<b>Toledo Juvenile Home</b>							
Toledo Juvenile Home	126.00	0.00	0.00	125.00	125.00	-1.00	PG 32 LN 22

# Health and Human Services

## FTE

	Estimated Net FY 2009	Supp-House Action FY 2009	Supp-Senate Approp FY 2009	House Action FY 2010	Senate Approp FY 2010	Sen Approp FY 2010 vs Est Net FY 2009	Page and Line #
	(1)	(2)	(3)	(4)	(5)	(6)	(7)
<b>Eldora Training School</b>							
Eldora Training School	202.70	0.00	0.00	202.70	202.70	0.00	PG 32 LN 27
<b>Cherokee CCUSO</b>							
Civil Commit. Unit for Sex Offenders	94.50	0.00	0.00	105.50	105.50	11.00	PG 47 LN 17
<b>Cherokee</b>							
Cherokee MHI	210.00	0.00	0.00	205.00	205.00	-5.00	PG 41 LN 31
<b>Clarinda</b>							
Clarinda MHI	114.95	0.00	0.00	114.95	114.95	0.00	PG 42 LN 8
<b>Independence</b>							
Independence MHI	287.66	0.00	0.00	287.85	287.85	0.19	PG 42 LN 14
<b>Mt Pleasant</b>							
Mt Pleasant MHI	116.44	0.00	0.00	116.44	116.44	0.00	PG 42 LN 20
<b>Glenwood</b>							
Glenwood Resource Center	938.88	0.00	0.00	947.24	947.24	8.36	PG 43 LN 16
<b>Woodward</b>							
Woodward Resource Center	733.64	0.00	0.00	737.16	737.16	3.52	PG 43 LN 19
<b>Assistance</b>							
Family Investment Program/JOBS	0.00	0.00	0.00	16.50	16.50	16.50	PG 18 LN 8
Health Insurance Premium Payment	21.00	0.00	0.00	19.00	19.00	-2.00	PG 27 LN 23
Medical Contracts	6.00	0.00	0.00	6.00	6.00	0.00	PG 27 LN 35
<b>Total Assistance</b>	<u>27.00</u>	<u>0.00</u>	<u>0.00</u>	<u>41.50</u>	<u>41.50</u>	<u>14.50</u>	
<b>Total Human Services, Dept. of</b>	<u>5,904.95</u>	<u>0.00</u>	<u>0.00</u>	<u>5,757.80</u>	<u>5,757.80</u>	<u>-147.15</u>	
<b><u>Veterans Affairs, Dept. of</u></b>							
<b>Veterans Affairs, Dept. of</b>							
General Administration	17.20	0.00	0.00	17.20	17.20	0.00	PG 11 LN 3
Iowa Veterans Home	951.95	20.76	20.76	972.71	972.71	20.76	PG 11 LN 10
<b>Total Veterans Affairs, Dept. of</b>	<u>969.15</u>	<u>20.76</u>	<u>20.76</u>	<u>989.91</u>	<u>989.91</u>	<u>20.76</u>	
<b>Total Health and Human Services</b>	<u>7,127.55</u>	<u>20.76</u>	<u>20.76</u>	<u>6,990.71</u>	<u>6,990.71</u>	<u>-136.84</u>	